



# Membership Form 2009 – 2010

## Senior Playing/Senior Non-Playing

Name of Player: ..... D.O.B.....

Address: .....

..... Postcode: .....

Telephone: ..... Mobile: .....

Email: .....

Playing Position: .....

Previous Clubs (if any): .....

Are you registered with any other club?  
.....

Medical Condition: .....

Coaching Qualification (if any): .....

**\*I consent to photos / video or quotes involving the persons named on this form to be used for future publicity and promotion for BRFC. I understand I can withdraw my consent at any time in writing to the Club Secretary.**

In compliance with the Data Protection Act, we must point out that the information on this form will be kept on a database. The data will be used for automatic processing for annual membership and information distribution.

If you do not wish to receive such mailings please tick here