

Emergency Parent/Guardian/Carer Details:

(Required for your child to train and play for AFC Aldermaston season 2025-26)

Age Group	Tots	U7's	U8	U9	U10	U11	U12	U13	U14	U17/18
Please Tick										

(This form MUST be completed and £50 paid to enable your child to train/play at AFC Aldermaston)

Football Organisation: - AFC Aldermaston

Details of football activity: - Training sessions and matches representing AFC Aldermaston

Fees for (2025-26) Season: - **Playing: Registration Training and Match Fees £260 per season shall consist of**
Registration Fee £50 (single payment)
Monthly Direct Debit £21 x 10 monthly payments
Training only: Registration Fee £50 (single payment)
Monthly Direct Debit £10 x 5 monthly payments

Tots Registration Fee - £25

Full Name of Player:	
Date of Birth:	
Home Address:	
Home Tel No:	
Mobile Tel No:	

Education Details

School Year as of September 2025:	
School Name:	

Medical Details

Doctors Name:	
Doctors Surgery:	
Doctors Tel No:	
Please indicate any medical conditions that the club should be aware of e.g. allergies or asthma.	
Please specify any medications your child may need.	



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- I agree to notify the club or relevant member of the coaching team of any changes to my child's medical needs.
- I will always supply my child/the club with appropriate medication.
- I have read the Codes of Conduct for Parents Players & Spectators along with the RESPECT guidance and I agree to be bound by and observe the Club Rules and the Rules and Regulations of the Football Association Limited and Football Association and all competitions in which the Club participates.
<http://www.afcaldermaston.co.uk> – documents
- In the event of the player or team being unable to complete the season no registration refunds will be made.
- **Parental Consent:**
- By completing this form, I agree to my child's personal and medical details being shared with AFC Aldermaston managers/coaches to safeguard my child at training and matches.
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- In the event that my son/daughter is injured whilst playing football/travelling to and from football events and I cannot be contacted on any of the above numbers then I hereby give my consent for my child to receive medical attention.

**Please pay £50 registration fee to the following account:
AFC Aldermaston S/C 30-90-90, Account 43272360, Reference: Team (u10's/U12's etc as applicable), Child surname and prefix (Smith A).**

Direct Debit * 10 monthly payments of £21 from 1st August, payment details to follow.....

The completed form will be retained by the club registration officer.

Primary Contact		Secondary Contact	
Name		Name	
Relationship to child		Relationship to child	
Address		Address	
email		email	
Tel No.		Tel No	

Full Name (capitals): _____

Signed: _____ **Date:** _____



AFC Aldermaston



- FA Accredited Club
- FA Qualified Coaches
- Fully qualified DBS
- First Aid trained coaches
- Club, League, Cup & Player registration
- Player Insurance
- Club tracksuit/Rain jacket or Kit (requirement applicable)
- Match Day Playing Fee (no further costs for league matches)
- No further cost for winter training
- Training Equipment
- Reserved training at the Hurst 3G facility School term Tuesday nights
- Safe summer training opportunities at the Rec-Soc
- Discounted Rate of 1 to 1 training with NC football coaching
- Opportunity to attend end of season Presentation and Disco.
- Team awards
- Non-competitive participation awards (age applicable)
- Christmas Disco.
- Club Christmas Goody bag.
- Easter Treats.
- Opportunities at selected first team home fixtures to be mascots (free parent entry)
- 2025 Bespoke Training kit.



ACCREDITED
PART OF ENGLAND FOOTBALL

