

UNITED SERVICES RFC - Mini & Junior Section - Registration Form

2003/2004 season

Child's Name:

Address:

Age:

Date of Birth:

Known Medical Conditions:

Known Allergies:

Current Medications:

Family Doctor:

Doctor Phone Number:

Parent or Guardian Name:

Home Phone Number:

Work Phone Number:

Mobile Phone Number:

E-Mail Address:

Alternate Contact Name:

Home Phone Number:

Work Phone Number:

Mobile Phone Number:

E-Mail Address:

Alternate Contact Name:

Home Phone Number:

Work Phone Number:

Mobile Phone Number:

E-Mail Address:

Special Notes:

Parents are invited to add any additional information here.

Also please note that parents are required to remain with their children at training and matches. If this causes you difficulty then please try to make arrangements with another parent to share this role. This should be someone with whom your child would fill comfortable in the event of illness or injury and someone you trust to make decisions about treatment in your absence. The team coaches and managers are unable to undertake this role as they have other duties to fulfill on the day.

** A New Emergency Information Sheet must be submitted every year, or as information changes*