



Westmeath Minotaurs Youth American Football Membership Form

Name: _____

Date of Birth: _____

Address: _____

City: _____

County: _____

EirCode: _____

Phone Number: _____

Email Address: _____

Parent/Guardian Name: _____

Emergency Contact Name: _____

Emergency Contact Phone Number: _____

Medical Information:

- Any known allergies or medical conditions: _____
- Current medications: _____
- Emergency medical treatment consent: I authorise the administration of any emergency medical treatment deemed necessary for my child while participating in American football activities.

Consent Form for Use of Images

We are proud to have your child as a member of the Westmeath Minotaurs American Football Club Youth Academy. To promote our activities and celebrate the achievements of our players, we would like to use images (photographs and videos) of the children participating in our club's activities on our website, social media, and other promotional materials.

Please read the following consent agreement carefully and indicate your permission by signing below.

Image/Video Sharing Consent Agreement:

I, the undersigned, hereby grant the Westmeath Minotaurs American Football Club permission to use images of my child, _____, for the purposes mentioned above. I understand and agree that:

1. The images may be used on the club's website, social media platforms, and in other promotional materials.
2. The images may be used for an indefinite period unless I revoke this consent in writing.
3. The images will be used in a manner that is respectful and in good taste.
4. My child's full name will not be disclosed without additional specific consent.

I acknowledge that I have read and understand this consent form, and I voluntarily give my permission for the use of my child's images as described above.

Parent/Guardian's Signature: _____

Date: _____

If at any time you wish to withdraw your consent, please contact us, and we will ensure that images of your child are no longer used.

- **A copy of our Child Safeguarding Statement is available to view/download on our website**
- **A copy of our GDPR Statement is also available to view/download on our website**

Signature of Parent/Guardian: _____

Date: _____

Player's Signature (if aged 18 or older): _____

I, the undersigned, agree to abide by the rules and regulations set forth by American Football Ireland and its affiliated organisations. I understand that participation in American football activities involves certain risks, and I release the American Football Ireland, Westmeath Minotaurs American Football Club, its officers, coaches, and volunteers from any liability for injury or damages incurred during such activities.

Signature of Player: _____

Date: _____

Please return this completed form to:

Committee, Westmeath Minotaurs American Football Club

For office use only:

Date Received: _____