





UNDER 18s REGISTRATION FORM

Project Name:

PARTICIPANT DETAILS Please provide us with your child's personal information as requested below in order for us to facilitate their participation in our activity session.

First Name:								
Last Name:								
DOB:	/	/	/	Gender: Male	Female	Prefer not to answer		
Address:								
			Postcode:					
Participant (Contact N	0:						
Participant E	Email Add	ress:						
Emergency	Contact N	lo:						
		-						

Emergency Contact Name:

Emergency Contact Relationship to Participant:

PLEASE NOTIFY US OF ANY RELEVANT MEDICAL CONDITIONS (PHYSICAL OR MENTAL) THAT MAY ADVERSELY AFFECT YOUR PARTICIPATION IN THIS SESSION:

CONSENT

In addition to facilitating your participation in our activity sessions, the Huddersfield Town Foundation may use personal information as provided by you for profiling and data analysis. As part of this, we may share your personal information with our partners including, but not limited to: Huddersfield Town Football Club; Premier League; Premier League Charitable Fund; Professional Footballer's Association; The Football Association; KAL; Kirklees Council; One Kirklees; Kirklees College and Locala. We may also contact you to promote related sporting activities as delivered by the Foundation that we think you might be interested in. Further, we request your consent to use your personal information in the following ways:

Please tick this box to provide your consent for us to occasionally photograph and / or film your child participating in our activity sessions. These photos and / or films may be used for promotional purposes and feature across our marketing platforms including but not limited to: match day programmes, Foundation website and Foundation social media platforms.

Please tick this box to provide your consent for us to contact your child with opportunities for volunteering; training and qualifications; competitions; education and / or employment.

In order to opt out at any time from your personal information being used in any of the above ways, you can do so by contacting the Foundation Company Secretary / Head of Foundation on 01484 503773. A copy of our Privacy Policy can be accessed on our website: www.htafcfoundation.com

Parent / Guardian Sig	nature:	Da	te:	/	/
01484 503773	www.htafcfoundation.com	f htafcfoundation		@town	foundation
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ONE CLUB, ONE COMMUNITY

Huddersfield Town Foundation Ltd, Leeds Road Sports Complex/Playing Fields, Leeds Road, Huddersfield, HD2 1YY, Tel: 01484 503773, www.htafcfoundation.com, Twitter @townfoundation, Facebook: htafcfoundation, Charity Number:1146501, Company Number: 07690182







PLEASE TICK OR DELETE ANSWERS AS APPROPRIATE.

ARE YOU 1 Male Female I prefer not to answer this question AGE 2 Please indicate your age by ticking one of the categories below. 0 - 5 (Pre-School) 6 - 8 (KS1) 9 - 11 (KS2) 12 - 14 (KS3) 15 - 16 (KS4)

17 - 18

3 DISABILITY

4	WHAT IS YOUR ETHNIC GROUP?		
	I prefer not to answer this question		
	No		
	Yes		
Doy	you consider yourself to have a disability?		

White Mixed/multiple ethnic groups Asian/Asian British Black/African/Caribbean/Black British Other ethnic group [...] I prefer not to answer this question





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