



Fair Play Policy

Within Dunloy Cuchullains GA & CC....

1. Players play for enjoyment and to improve performance, not just to please their parents or coach.
2. Where rules apply, players try to understand and stick to them.
3. Players accept the decisions of coaches and officials.
4. Players will control their tempers at all times.
5. Players will be good "sports". They will cheer good play, whether it is our players/teams or opponents.
6. The aim of the game is to have fun, improve skills and to feel good
7. Players will work equally hard for themselves and the team.
8. Players will treat all players as they themselves would like to be treated.
9. Players will co-operate with coaches, teammates and opponents – without them there is not a game.

Dunloy Cuchullains GA & CC

I understand and agree to abide by the rules and fair play policy of Dunloy Cuchullains GA & CC

Signed (Junior Member): _____

Counter signed (Parent/Guardian): _____

Date: _____

Failure to adhere to the Membership Rules and the Fair Play Policy will lead to disciplinary Action being taken by the club.

Dunloy Cuchullains GA & CC: Personal Information Form

| | | |
|---|-------|------------------------------------|
| Membership No: | Name: | DOB: |
| Home Address: | | Members Mob No: (U16 & 18 Only) |
| Additional/Emergency Contact Information: (Text messaging to Parents Mobile will be used for communication with the coaches) <i>(All members need to update this section)</i> | | |
| Parent Name: | | 2nd Contact Name: |
| Tel No: | | Tel No: |
| Mob No: | | Mob No: |
| Medical Information | | |
| Is there any medical information the club needs to know about? (E.g. Asthma, Epilepsy, Diabetes, etc?) | | |
| Does your child take any medication? | | |
| Does your child have any allergies? (E.g. To nuts, wasps, medication etc?) | | |

Consent to travel to Away Fixtures

I agree to allow my child to travel to Away Fixtures for the duration of the season.

Signed (Parent/Guardian): _____

Date: _____