

Ely RUFC Membership Renewal/Application 2019/ 2020

Membership / card No.

All members must be registered on the RFU's GMS database. GMS is our preferred method of payment and utilising the GMS system for all of our membership records enables your personal information to be stored securely and for Ely RUFC to meet our GPDR obligations.

Once you have logged in to your personal GMS records, you will be able to amend your own contact details, view your RFU qualifications, and to purchase your club membership.

If you have registered before, please log on to your GMS account, update your personal details, select the membership required and then follow the instructions to purchase your membership. Please also complete this form and return it to the membership secretary,

If you are new to the club or have lost your GMS log-in details, please complete and return this form to the membership secretary. Once your completed form has been received, you will be contacted by the membership secretary with your GMS log-in and instructions on how to make the relevant payment.

Membership cards:

In conjunction with EOSA (Ely Outdoor Sports Association), Ely Hockey Club & Ely Tennis Club, we will be issuing all 18+ paid members with membership cards, which will give our members some significant savings (including a discount at the club bar) with a number of our Sponsors and local businesses. Please see the EOSA website for an up to date list of additional membership benefits.

Please note:

If you are applying for U18 (Mini / Youth or Girls) Membership, then a Parent or Guardian MUST complete Section 1 (Contact information) with their own details, Section 2 with the membership required, Section 3 with the Young Persons details and Section 4 (Name, Signatures & Date). Please complete a new form for each applicant.

Adult applicants please only complete sections 1, 2 + 4.

-		TI		- 1	
S	C	LI	TO .		

1 | Page

Contact Informat	ion (1	Γo be c	comple	ted by	all ac	dult	appl	icants	or l	oy a	parent or guar	diar	າ).			
Name: (and relationship to child if parent / guardian)											Mobile:					
Email Address: (Please print clearly)																
Date of birth:								RF	U I	D N	O: (if known)					
Address: (Please print clearly																
Home Telephone:											Post Code:					

Section 2.

Club Membership required: (To be completed by ALL. Please tick appropriate box)

Non-Playing Full Club Membership (Inc International Ticket applications, membership card & full voting rights)	£90.00	
Senior / Adult Playing Membership (Inc International Ticket applications, membership card & full voting rights). Note: Additional match fees of £5/match are payable on match days to the Team Manager	£90.00	
Social / Touch / Tag Membership (Inc membership card but NOT Int ticket applications)	£60.00	
VP Membership (If you are a club honorary VP, this membership includes all benefits of Full Membership of the club, inc. Int Ticket applications and membership card)	£45.00	
Parent of Mini / Youth player (If you are a parent of a fully paid Mini or Youth player, this membership includes all benefits of Full Membership of the club, inc. Int Ticket applications and membership card)	£45.00	
Mini / Youth Playing Membership (1st child)	£90.00	
Mini / Youth Playing Membership (2nd child)	£60.00	
Mini / Youth Playing Membership (3 rd & any additional child)	£30.00	
Girls (12-18) Playing Membership	£45.00	

Section 3

U18 / Young Person (Mini / Youth or Girls) Player Details

Players	Date of			
full name:	Birth			
School /	RFU ID			
College	No:(if known)			

Does the Young Person have or have any history of the following medical problems (please tick appropriate box):

Heart conditions	YES	NO	Diabetes	YES	NO	Chest or Breathing problems	YES	NO					
Epilepsy	YES	NO	Any Allergies or Phobias	YES	NO	Neck, back or joint injuries	YES	NO					
Has the Young person previously suffered from concussion or any other head injuries?													
Does the Young person take or carry any medication (i.e. epi-pen, inhaler etc)?													
If yes to any of the a or if there are any of issues that you thin should be aware of, please give details of additional information	ther k we then or any												

Additional Parent	: / GL	uar	ala	an	CO	nta	ICT	aeta	alis	<u>:</u>																		
Name: (and relationship to child).															N	lob	ile:											
Email Address: (Please print clearly)																												
Date of birth:		RFU ID No: (if kno										f knc	own)															
Address: (Please print clearly																												
Home Telephone:		Post Code:																										
Medical & Photographic Conse In the event that the above Young Person requires urgent medical attention during an Ely RUFC activity, and neither adult (on this form) is present, then I give my authority for the most senior Ely RUFC coach or official present to give consent on my behalf.					isei	I agree that photographic / video images of the above Young Person may be used for publicity, coaching and promotional purposes in line with RFU best practice, and that I have no objection for their name to be used in match reports etc.									n g	In order to prevent the worsening of any injuries and to promote correct treatment and recovery, I give permission for the Ely RUFC Safeguarding Officer/s to notify the											e	
Signed:						Sic	ane	q.									interests. Signed:											
						Signed:																						
If you do not agree to happy to discuss this																	Saf	eg	uar	din	g (Offic	er	wh	o w	/ill l	ре	
Section 4 By signing this Membership Application, I agree to abide by the Rules, Codes of Conduct and Policies of Ely Rugby Club (Ely RUFC). Signed: Print name: Date:																												
	v logo	10 d	int		(O. I.E.	CNA	Print name:Date:													_								
If you have already logged into your GMS account and purchased your membership, please tick this box Please complete the membership form, sign and return to elytigersmembership@gmail.com , or return in person to the Club Membership Secretary. All personal information will be held securely in line with GDPR recommendations.												'n																
Section 5 Only to be completed						ı <u>b</u> er:	ship	Sec	creta	ary	<u>′</u> _																	
Method of payment confirmed:		MS				Cas					que		С	ard			Ba Trar	nk nsfe	r	С	Dire	ect D)eb	oit				_