

# CHIPPING SODBURY RUGBY FOOTBALL CLUB

(Affiliated to the R.F.U., Bristol Combination & Gloucestershire R.F.U.)

## YOUTH SECTION

### YOUTH SECTION CHAIRMAN

Paul Clark  
2 Cotswold Villas  
Cotswold Lane  
Old Sodbury  
South Gloucestershire  
BS37 6NF  
Tel: 01454 320065  
Email : rugby@bythewell.plus.com

### YOUTH SECTION SECRETARY

Alan Daniel  
11 Summers Mead  
Yate  
BRISTOL  
South Gloucestershire  
BS37 7RB  
Tel: 01454 322562  
Email : csrfcyouthsec@hotmail.co.uk

September 2010

Dear Parents, Guardians and youth members,

Well summer holidays are behind us and the new Rugby season is now upon us.

It all starts again on Sunday 5<sup>th</sup> Sept at 10am, and we look forward to seeing members old and new.

This season brings a new club strip worn with pride by all CSRFC Players from U7 to Seniors, so if you come to watch the 1<sup>st</sup> XV on Saturdays they will be wearing the same strip that the youth will wear to play matches on the Sundays. One Club - One Team.

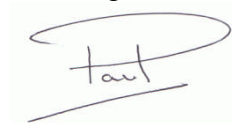
The club shop is now situated at Any Sports in Yate and the new shirts, shorts and socks are available to buy now. For matches a team playing shirt will be provided but players need to purchase shorts and socks. Please make sure your son or daughter has the required gum shields if they are in playing in U9's rugby or above.

Please note that no discount is available on club kit but members can obtain discount on non club items such as gum shields, body armour and boots.

Please complete and return the necessary membership forms together with membership fees by Sunday 26<sup>th</sup> September latest, we have to re-register all players by 1<sup>st</sup> October with the RFU this season, (RFU DIRECTIVE) and non paid up players will not be registered and therefore will not be insured.

It just remains for me to wish both players and parents/spectators an enjoyable season.

Best Regards,



Paul Clark - CSRFC Youth Section Chairman

**President:** I Aldous

**Ground:** The Ridings, Wickwar Road, Chipping Sodbury, Bristol. Tel: 01454 312852

**Club Colours:** Black

**CHIPPING SODBURY RUGBY FOOTBALL CLUB  
YOUTH SECTION**

(Affiliated to the RFU & Gloucestershire RFU)

[WWW.CSRFCYOUTH.ORG.UK](http://WWW.CSRFCYOUTH.ORG.UK)

[www.csrfc.com](http://www.csrfc.com)

**MEMBERSHIP  
REGISTRATION  
PACK**

**2010/2011**

**Pack Includes:**

Registration Instructions

Family Social Membership Form (Mandatory 1 per Family)

Player Registration Form (Mandatory per player)

RFU Registration Form (Mandatory per player)

400 Club Registration Form (Optional)

# CHIPPING SODBURY RUGBY FOOTBALL CLUB YOUTH SECTION

(Affiliated to the RFU & Gloucestershire RFU)

## MEMBERSHIP REGISTRATION PACK 2010-2011

### Please read the following instructions:

The Registration is unchanged for the 2010/2011 Season and is made up of a CSRFC Social Membership priced at £15.00 plus the relevant Youth Section Players subscription for each player in the family (U8-U12 - £30.00 & U13-U17 - £35.00).

- **PLEASE NOTE:** The £15.00 is waved where parent or guardian is a paid up Full Member of CSRFC for 2010/2011 season.

Players team depends on that players age on 1<sup>st</sup> September 2010.

(A player who is 9 on 1<sup>st</sup> Sept would be in the U10's and a player who is 9 on the 2<sup>nd</sup> September would be in the U9's)

#### Examples:

Family with 2 playing members one U9 & one U16:  
Social Membership = £15.00 + £30.00 + £35.00 = £85.00 to pay.

Family with one U16 playing member  
Social Membership = £15.00 + £35.00 = £50.00 to pay.

Please note players under a family social membership are immediate family i.e. brothers & sisters and does not include cousins or wider family members.

Please complete the CSRFC Family Social membership form and attach the relevant number of Player Registration forms.

There is one player form supplied in this pack, additional forms can be downloaded from the registration form page on the website. [www.csrfcyouth.org.uk](http://www.csrfcyouth.org.uk)

Please note we need to update all our RFU registrations by 1<sup>st</sup> October so please return forms asap.

Once the forms are completed please place in an envelope and hand in on Sunday 5<sup>th</sup>, 12<sup>th</sup>, 19<sup>th</sup> or 26<sup>th</sup> September 2010 when a registration desk will be available.

**PLEASE NOTE ALL FAMILY & PLAYER SUBS MUST BE  
PAID BY 26<sup>th</sup> SEPTEMBER 2010.  
THIS IS AN RFU REQUIREMENT THIS SEASON**

**ANY PLAYER NOT REGISTERED AND PAID UP BY THIS DATE WILL NOT  
BE SELECTED OR ALLOWED TO PLAY IN ANY MATCHES**

Should anyone have difficulty in paying the required fees please speak to either the Membership Secretary (Mike Clarke), Youth Chairman (Paul Clark), Vice Chair (Paul Howell) or your team welfare officer.

# CHIPPING SODBURY RUGBY FOOTBALL CLUB YOUTH SECTION

(Affiliated to the RFU & Gloucestershire RFU)

## FAMILY SOCIAL MEMBERSHIP REGISTRATION FORM 2010-20111

Surname \_\_\_\_\_

1<sup>ST</sup> Name Parent/Guardian) \_\_\_\_\_

Partner/Spouse (Full Name) \_\_\_\_\_

Non-playing siblings \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Contact Tel. No. \_\_\_\_\_ Mobile No. \_\_\_\_\_

E-Mail Address \_\_\_\_\_

I agree to abide, and ensure that all family members and visitors that I bring to the club or who attend in my place abide by the rules of the club and follow the guidelines contained within the RFU & Club Welfare Policies and Parent Guidelines. (Copies available on the Youth Notice Board in the club and downloadable from the website – [www.csrfeyouth.org.uk](http://www.csrfeyouth.org.uk) )

I recognise that disciplinary action which could include expulsion from the club and facilities may be taken for serious breaches of club and RFU rules and welfare policies.

I understand that this Youth Section Family Membership allows me to use the club facilities but does not provide me with full CSRFC voting rights. It does however provide voting rights (1 per family) for the Youth Section AGM and any special meetings.

(Insert signature)

Date \_\_\_\_\_

\_\_\_\_\_

### Membership Subs Summary: (Please complete)

**FULLY Paid Up CSRFC Member**

**YES/NO**

**CSRFC Social Membership (If NO Above)**

**£ 15.00**

Player & RFU registration forms attached

**Player 1** (Name) \_\_\_\_\_

**£ .**

**Player 2** (Name) \_\_\_\_\_

**£ .**

**Player 3** (Name) \_\_\_\_\_

**£ .**

**Player 4** (Name) \_\_\_\_\_

**£ .**

**Total Enclosed**

**£ .**

President: Ian Aldous

Ground: The Ridings, Wickwar Road, Chipping Sodbury, BRISTOL, Tel No. 01454 312852

Club Colours: Black

# CHIPPING SODBURY RUGBY FOOTBALL CLUB YOUTH SECTION

(Affiliated to the RFU & Gloucestershire RFU)  
**PLAYER REGISTRATION FORM 2010-20011**

Player's Name in Full \_\_\_\_\_

Parent / Guardian \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Contact Tel. No. \_\_\_\_\_ Mobile No. \_\_\_\_\_

E-Mail Address \_\_\_\_\_

D.O.B \_\_\_\_\_ School Years \_\_\_\_\_ Male / Female

Medical Conditions / Allergies \_\_\_\_\_

Emergency Contact Details: Name of Contact \_\_\_\_\_

Tel No. \_\_\_\_\_ Mobile No. \_\_\_\_\_

## **PARENT/GUARDIAN AND YOUNG PERSONS PERMISSION FOR THE USE OF PHOTOGRAPHS AND RECORDED IMAGES**

(insert parent/guardian full name)

I \_\_\_\_\_ Consent to the  
photographing, videoing and publication of images of

(Name of young person)

\_\_\_\_\_ Under the RFU s Child Protection  
and best practice guidelines and I confirm that I am legally entitled to give  
this consent

(Name of young person)

I also confirm that \_\_\_\_\_  
is not under a court order.

(Insert signature)

Date \_\_\_\_\_

(Name of young person)

I \_\_\_\_\_ Consent to the  
Photo graphing, videoing and publication of images of my involvement in Rugby Union  
under the RFU s Child Protection and Best Practice guide lines.

(Insert signature)

Date \_\_\_\_\_

ALL REGISTERED AND ANNUAL SUBS PAYED PLAYERS ARE COVERED BY RFU PERSONAL  
INJURY POLICY. (THE COVER IS SOME WHAT LIMITED AND YOU MAY WISH TO TAKE OUT  
ADDITIONAL COVER)

President: Ian Aldous

Ground: The Ridings, Wickwar Road, Chipping Sodbury, BRISTOL Tel No. 01454 312852

Club Colours: Black

# RUGBY FOOTBALL UNION

## YOUNG PLAYER REGISTRATION FORM

RFU Registration Number (if known)

This form should be completed for all players within the club who have **NOT** previously registered with the **RFU**, are re-registering or have data amendments.

Please complete each section in **BLOCK CAPITALS** and return to your Club Registration Officer along with **TWO** passport size photographs. Please tick where appropriate  **New Registration**  **Re-registration**  **Data Amendment**  **Club Transfer**

**First Names:** \_\_\_\_\_ **Surname:** \_\_\_\_\_ **D.O.B.:** \_\_\_\_\_

**Home Address:**

Postcode: \_\_\_\_\_

**Male/Female**

**Home Tel:**

**Mobile Tel:**

**Email address:**

**Ethnic Origin** (Please tick (✓) where appropriate):-

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> White: British | <input type="checkbox"/> Mixed: White & Black Caribbean | <input type="checkbox"/> Asian and Asian British: Indian     | <input type="checkbox"/> Black or Black British: Caribbean |
| <input type="checkbox"/> White: Irish   | <input type="checkbox"/> Mixed: White & Black African   | <input type="checkbox"/> Asian and Asian British: Pakistan   | <input type="checkbox"/> Black or Black British: Africa    |
| <input type="checkbox"/> White: Other   | <input type="checkbox"/> Mixed: White & Asian           | <input type="checkbox"/> Asian and Asian British: Bangladesh | <input type="checkbox"/> Black or Black British: Other     |
| <input type="checkbox"/> Chinese        | <input type="checkbox"/> Mixed: Other                   | <input type="checkbox"/> Asian and Asian British: Other      | <input type="checkbox"/> Other Ethnic Group                |

Previous Rugby Club (if any)

**Representative Playing History** (please give dates etc., using a separate sheet if necessary)

**Playing Position:**  Unspecified  Front Row  Forward  Back **Plays at school:**  Yes  No

**Medical Conditions/allergies** (Asthma, Epilepsy, Allergic to penicillin) Please give full details using separate sheet if necessary: (Completing this section is not obligatory but the RFU in the interests of child safety strongly recommend that you do so).

**Name of Parent/Guardian:-**

**D.O.B.**

**Address of Parent/Guardian** (if different from above):

Postcode: \_\_\_\_\_

**Contact Telephone Number:**

**Email address:**

**School/Education Establishment Name and Address:**

Contact Number:

Postcode:

### DATA PROTECTION

The RFU is fully aware that some people will only want to receive information from the RFU on rugby issues and, therefore, you can ensure that you only receive this type of information by ticking the appropriate boxes below. However, some people will want to receive other information and, therefore, there are three options set out below.

If you do or do not wish to receive certain types of data, you should tick the appropriate box below; the RFU may also use such personal data for the following purposes:

- to send you by electronic mail (including email, SMS or image messages, etc) information about our official sponsors, their associated companies and their products and services which may be of interest to you.  
Tick here if you **do** wish to receive such information
- to send you by electronic mail (including email, SMS or image messages, etc) other information about RFU tickets, products, special offers, opportunities and related service which may be of interest to you e.g. TEL, RFU Travel, The Rugby Store etc.  
Tick here if you **do not** want to receive such information
- to pass your details to our official sponsors, who may use them now or in the future and to keep you informed by post of their products and services and to compile market research information and statistics, e.g. Nike, O2, Ford, etc.  
Tick here if you **do not** wish to receive such information

I declare that the above is correct. In signing this form I agree that the above named player can be bound by the laws and resolutions of the Rugby Football Union and its constituent body and the rules of:

..... Rugby Football Club  
PLEASE STATE CURRENT CLUB

Signed (player):

Date:

Signed (parent / guardian):

Date:

Countersigned (Club Official):

Date:

# CHIPPING SODBURY R.F.C. 400 CLUB APPLICATION FORM

I ..... (Full Name)

Mr/Mrs/Miss/Ms\*

of .....

.....(Address) .....(Phone Number)

Apply for membership of the Chipping Sodbury 400 Club subject to the rules detailed below.

I will pay my subscription annually and enclose a Bankers Order/Cheque/Cash\*

\*Delete as appropriate

Signed..... Date .....

## RULES

1. The Name of the club is Chipping Sodbury Rugby Football Club, 400 Club and is situated at The Ridings Wickwar Road, Chipping Sodbury, South Gloucestershire.
2. The 400 Club is formed to raise funds for the general purpose of the Chipping Sodbury Rugby Football Club.
3. Applications for membership of the 400 Club shall be made in writing to the club.
4. The membership of the 400 Club shall not exceed 400 in number.
5. Members will be allotted a membership number from 001 to 400, which will be advised to them in writing upon acceptance of their application to join. This number cannot be changed.
6. Each member of the 400 Club will become a Social Member of Chipping Sodbury Rugby Football Club and will be entitled to enjoy the facilities offered at the club.
7. The Draw will be held every three months at a time and date agreed by the Management Committee. In all matters the decision of the Management Committee shall be final.
8. Fifty percent of all income received will be made available for prizes.
9. All members will be notified by post unless present at the club.
10. The Accounts of the 400 Club will be produced at the Annual General Meeting of the Chipping Sodbury Rugby Football Club; and will be available for inspection at any time on request.
11. All profits will be paid to Chipping Sodbury Rugby Football Club.

.....Detach.....

## BANKERS ORDER

The Manager.....Bank PLC.

Address..... Post Code.

Please pay on the.....day of.....20.... and annually thereafter, until further notice

the sum of £24.00 (Twenty Four Pounds) to NatWest, Filton Bristol Branch Sort Code 52-10-05 for the credit of Chipping Sodbury RFC 400 Club. Account Number 89606744.

Quoting Reference .....

Please debit my/our Account ..... in the name of.....

Signed..... Date .....

Please return this form to Rod Harris, 400 Club Administrator. At the club or send to:- 30, Bowling Road, Chipping Sodbury,

BRISTOL BS37 6EP

Created 04/01/2008