**Membership No:** office use only

**Wiltshire Federation of Young Farmers’ Clubs Membership Form 2021/22**

**PAYMENT OF £………………. Received on…………….. by…………………**

**By cash / Cheque / BACS payment (delete as appropriate)**

*Clubs - attach club Bank details if you are happy to take payment by transfer*

**Please complete this form (in CAPITAL letters), sign it and then give it, with your subscription money to your CLUB TREASURER**

**Section 1 – Essential Information CLUB: ……………………**

**Title:** ……. **First Name:** …………………. **Surname: …………………………..**

**Preferred Name:……………….. Date of Birth: …………..………..** **Age (on 1st Sept 2019):** ………

**I identify my gender as:**

Male : Female: Self Identify:

Please use this space if you wish to self identify

**Address: ……………………………………………………………………………………….**

**Postcode: …………………………………………..**

**Home Tel no: ……………………………**  **Member’s mobile no: ……………………….**

**Member’s email address: ………………………………………………….**

*(U18 members only)*

**Parents name: ………………………. Parent’s email address: …………………………**

**Section 3 – Emergency Contact Details**

**Emergency Contact Details (ICE)** (2 for U18 year olds and at least one for over 18 year olds)

**Name: …………………………………. Relationship: ………………………..**

**Mobile number: ……………………….. Alternative phone number: ……………………..**

**Name: …………………………………. Relationship: ………………………….**

**Mobile number: ……………………….. Alternative phone number: ……………………**

**Photographic information**

As most of the Activites and competitions at the minute are virtually taking place, do you consent to National, Area, County and Club YFC using any photographs, videos or photographic images that the NFYFC, Area, County or Club produce which are of you, (or your child if under 18) for promotional purposes? This would include printed and online digital sources including our magazine, website, video and digital media? **Yes/ No**

***For under 18 year olds – please see Parental consent section***

**Name……………………………………..**

**Section 2 – Health & Wellbeing Information**

To ensure you/your child is able to participate and enjoy the activities and opportunities that YFC provides we ask that you complete the following health information and details of dietary requirements, medical conditions, disabilities or special educational needs (SEN)

Please provide additional information

**Do you have any of the following?**

Health conditions **Yes/No**

Disability **Yes/No**

SEN **Yes/No**

Allergies **Yes/No**

Other additional needs **Yes/No**

Dietary requirements **Yes/No**

**Any other relevant information we need to be aware of (e.g. Medication):**

Please provide additional information

**Section 4 - Marketing Preferences**

As part of your membership of NFYFC, we will keep you informed of relevant membership news, events and activities through our communication channels both online and occasionally in print. A monthly e-newsletter called the YFC Buzz will be sent to your email address. Otherwise, NFYFC and your county will only use your email to contact you from time to time about opportunities that may be available to you as part of your membership or in relation to your role within YFC. Your details will not be shared with 3rd parties for marketing purposes.

**Please can you confirm you are happy with this** **Yes/ No**

**Parent/Guardian Consent Form (under 18’s only) for Club & County Activities**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ the Parent/Guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

give permission for my child to participate in any lawful events/activities organised at Club or County level of the Young Farmers Federation. In accordance with the NFYFC Safeguarding Policy

*I am aware that while the adults in charge of the event will take all reasonable steps to protect all participants from harm, they cannot necessarily be held responsible for any loss, damage or injury suffered during or as a result of the activity.* Yes No

I am happy for any videos or photographs to be used for the legitimate interest of the organisation which includes promotional activity and the publishing of competitions results. Videos and photos that are submitted as part of the activity and which include an image of your child and their name will be used unless there are safeguarding or other reasons why you do not wish your child’s photograph to be used, please indicate this below. No images will be sold but may be used for external press and news features. All images will be kept for use for a limited time and then only for historical and reference purposes. Do you consent to this Yes No

*I am happy for my child to be transported, by a member of Wiltshire Federation of YFC, of either sex, to and/or from Club and County visits and events if I am unable to personally transport them. Yes No*

If you wish to receive a separate Parental Consent form for each YFC trip/visit/activity, please tick the box at the end of this line otherwise the membership card will be proof of Parental Consent for Club & County activities.

The medical information is correct to the best of my knowledge and in the event of illness or accident requiring hospital treatment I understand that the responsible person at the event will make every effort to contact me. In an emergency doctors/surgeons will make the decision regarding the necessary treatment without my consent.

*Details on this form will be held securely and will only be shared with staff or others who need this*

*information in order to meet the specific needs of your child.*

***I agree to abide by the NFYFC Policies and legislation*** *(full details available upon request – all Clubs have a copy)*

**Member’s Signature: Date:**

**Parent/Guardian Signature (of U18 yr old): Date:**

**Privacy notice -** For more information on our privacy notice visit the National Federation of Young Farmers’ Clubs

Website at: [http:\\www.nfyfc.org.uk\privacy](http://www.nfyfc.org.uk/privacy)