



WFA Health Disclaimer & Registration

Registration and Medical Information

Name:	Date of Birth:	Gender:
Address:	Post Code:	
Home Tel:	Mobile Tel:	
Email:		
Organisator :		
Venue:		
Club Name:		

Do you have a disability or injury that may prevent you participating actively in the practical session?
Yes / No (please delete or circle)

Do you have a learning difficulty?
Yes / No (please delete or circle)

If you have answered yes to the above, please give further details and indicate any requirements you have:

Current Injury / Illness: (incl. diabetes / asthma / epilepsy / allergies / heart problems):

Current status: (please delete or circle) **FULLY FIT** **UNSURE** **INJURED/ILL**

Previous Injury / Illness (of relevance)

Medications / tablets (currently being taken):

Other Information: (please declare any other medical information you feel appropriate)

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Emergency Contact / Next of Kin:

In the event of emergency what is the name of the person we contact?

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What is their telephone number(s)?

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Terms and Conditions

- Before taking part in this sporting activity, participants are required to complete the registration form, which will remain valid for all and any other sessions over the period that Walking Football is run.
- It is your own responsibility to keep us updated of any changes to your personal re-registration and medical information i.e.- illnesses new or ongoing, injuries, any health concerns or personal data.
- Walking football is a competitive sport involving potential risks to health by its nature. Whilst every effort is made to ensure that we play in a friendly and gentlemanly way, in accordance with WFA rules, please note that members take part in this activity at their own risk. The group, representative team and individual members cannot be held responsible for any injury. The group retains the right to discontinue participation of any player who behaves in a non-gentlemanly or dangerous manner.
- All players are playing **AT THEIR OWN RISK** throughout any of the walking football sessions.
- All participants are asked to abide by the WFA rules of Walking Football and participate in the session in a safe and sporting manner and with due regard for the safety of their fellow participants
- I agree and consent to The WFA and its media partners filming, photographing and recording my image and/or voice (“the Footage”) for the sole purpose of promoting Walking football. I grant The WFA rights and consent to permit the fullest use of the photography all means to promote in all media. I accept that The WFA will own these images and will only use them for the purposes outlined above.

SIGNATURE: _____

PRINT NAME: _____

DATE: _____