

FOR OFFICE USE:

Aboyne Golf Club Formaston Park Abovne Aberdeenshire AB34 5HP

11th March 2020

Annual Consent Form - Aboyne Golf Club Junior Section

Juniors details: Full Name: Known as _____ _____ Post Code: _____ Address: Home Telephone: Date of birth: Age: **Parent / Guardian Details** Relationship _____ 1st Name: 2nd Name: ______ Relationship _____ Contact Mobile Numbers: 1. ______ 2. _____ 2. _____ E-mail (Parent / Guardian): E-mail: (Child) Medical: Doctor's Phone: Doctor's Name: _____ Please list any allergies / medical conditions: Parental consent: I agree to my child / children* participating in any of the golfing activities organised by Aboyne Golf Club and they will abide by the guidelines and procedures issued for Junior members. I understand that my child is not allowed to leave any activity session run by Aboyne Golf Club during the stated time period and will not be released unless the club organisers are confident that the child is being supervised by a nominated adult and is therefore safe to leave the club. I agree to my child / children* being transported by Aboyne Golf Club in any authorised vehicle by an approved and qualified driver. In the event of any injury or illness I authorise the organisers to obtain on my behalf such medical assistance that my child may require. I consent to my child's picture being used for publicity purposes. 'I consent to my child's data being used as per the Club's privacy policy. I consent to being placed on the mailing list of Aboyne Golf Club. Please tick this box Signature _____ Date _____ Print Name: ___ Please sign and return to: pro@aboynegolfclub.co.uk Data Protection: Please note that all information gathered is for the sole use of Aboyne Golf Club and will not be passed on to any other body and will be regarded as strictly private & confidential.

Details entered on to Clubv1 Date: ______ By: _____