

Dear Parent/Guardian & Player

January 2017

You are very welcome as a member of Castleknock Celtic.

We are beginning another season, and this promises to be another exciting one.

We hope you will all enjoy your involvement with our club, as we promote the ideal that taking part is the most important thing about organised sport. Winning is only an added bonus for some!

Our motto is that all our players will be "the best they can be".

Club Ethos

The FAI Code of Ethics & Good Practice for Children's Football states that every player must be registered with the club and parent/player must adhere to our Club's Code of Conduct which is available on our website at

http://www.castleknockceltic.yourclub.ie/pages/CodesofPractice98 and in our clubhouse.

Our own comprehensive childcare policy ensures that the FUN element is at the centre of the game, while protecting children and developing their skills at the same time. This policy also provides protection for managers and assistants who have the enormous responsibility of looking after our children.

By signing at the bottom of this page, both player and parent are committing to abide by the Code. All of our coaches/assistants are volunteers and give freely of their time. We require parents to stay and watch training and matches.

In the event that this is not possible, it is the parents responsibility to make sure they have someone in their place in case they are needed, e.g. if an injury occurs. You must always be there to collect the child at end of training or match to ensure he or she is taken home safely, unless other arrangements are agreed with the manager.

Fees

This season (Mar 2017 to Nov 2017) the club registration fee for one child is €260 (see other side of leaflet). pitch. See overleaf for details of family members' fees.

Registration fees must be paid by end-April 2017 for players not paying by Standing order. Standing Order attached for your convenience or is available to download on website. Your child will not be eligible to play in competitive matches or be covered by insurance until he/she is properly registered and registration fees paid/agreed (Standing Order etc).

The football season from 2017 onwards starts in March and ends November. There is break in July/Aug, number of weeks' break depends on age group.

As we try to publicise matches during season, please tick this box if you agree to photos of your child(ren) appea	ring on our
website or newspapers.	

Important Note

It is parents' responsibility to advise the club in confidence of any additional needs (medical etc.) relating to their child.

Tony JordanLucy CusackHonorary SecretaryChild Welfare OfficerCastleknock Celtic F.C.Castleknock Celtic F.C.

I have read and agree to abide by the Castleknock Celtic F.C Code of Conduct as set out above.

Parent's NAME: _	Player's NAME:	
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Parent'sSIGNATURE:______Player'sSIGNATURE:______

Date: _____



Castleknock Celtic F.C.

Registration Form - 2017

Dear Parent(s)/Guardian(s)

Please complete details below and return to your child's manager or club official. If more than one club member in family, return to manager of YOUNGEST member. You must attach the following to the completed form:

(A) Standing order OR (B) Pay by cash/cheque in full or instalments - (must be completely paid by 30th April.)

<u>All fees not being paid through Standing Order must be paid in full by 30th April 2017.</u>			
Player's Name (youngest if more than one in family)	Date of Birth:		
Player 2 Name (If more than 1 from same family)	Date of Birth:		
Player 3 Name (If more than 2 from same family)	Date of Birth:		
Players Address:			
Original Birth Cert / Passport Produced YES NO -			
Name of most recent CCFC Manager:			
Payment Method (Please Tick) Standing order Cash/Cheque	Amount Received €		
Receipt Issued YES NO Receipt Number	Date .		
Registration fees for 2017			
1 Player in family TOTAL €260 - Maximum 5 Monthly Payme	ents of €52 each month		
2 Players in Family TOTAL €400 - Maximum 8 Monthly Paymer	nts of €50 each month		
3 Players in Family (or more) TOTAL €470 - Maximum 10 Monthly Payme	ents of €47 each month		
Mother's / Guardian's Name (BLOCK CAPS)	Mobile Number:		
Father's Name / Guardian's (BLOCK CAPS)	Mobile Number:		
Contact e-mail address(es):			
Parent / Guardian Signature:	Date:		
Received on behalf of CCFC (print name)	Date:		
CCFC Reference (Club use only)			