

Leybourne Youth Football Club

Founded 2023
England Football Accredited
Kent County FA Affiliated



Registration Form 2025 - 2026 Season

Players Name..... Date of Birth (DD/MM/YYYY).....
Address..... Home No.....
..... Parent Mobile No.....
..... E-mail
Postcode..... Emergency Contact Name.....
School..... Emergency Contact Telephone
School Year (Sept 25)..... ..

Disability (Medications)

For insurance purposes the Club needs to know the nature of any disability/medical conditions you may have. In the box please state the disability/illness and also list any medication(s) you are required to take. Please note you are responsible for bringing and administering any medication. If the medication cannot administer in an emergency, and in the opinion of a medical practitioner the necessity arises, I give full consent for emergency first aid (including anaesthetic to be administered to me.)

Details of disabilities/medical conditions (and any medication(s))

Social Media & Image Consent

I give permission for use of images of the above-mentioned player in connection with the playing of football, social events and publicity with the Club and the publishing of them in any media including the Club website.

Please tick: Yes ☐ No ☐



2025-26 Subscriptions

Subscriptions for the 2025-26 season are set at £325 per player. This consists of a **£25 signing-on fee due by 31st July** followed by the **£300 subscription fee** due in full by no later than the 31st of January 2026. Payment can be made in two or four instalments if required, the first by the 31st of August and the last by the 31st of January.

Payments should be made by bank transfer to (alternatively we can accept cash):.

Bank Name: HSBC
Account Name: Leybourne Youth Football Club
Account Number: 61560743
Sort Code: 40-43-44

When paying by bank transfer can you please ensure the name of the player signing on for the club and the team they are playing for is set as a reference e.g. Kingsley W U9's

Parent Agreement

I have fully understood the 'Spectators and Parents/Carers Code of Conduct' and agree to abide by the rules therein. I also accept responsibility for the behaviour of my son/daughter signing with the Club, other family and friends that attend matches, training, and events. Furthermore, in accordance with the 2018 General Data Protection Regulation (GDPR) I give consent to the collection, storage and use of personal information on my son/daughter and family as stated in the accompanying Leybourne Youth FC Privacy Notice.

Name (Print)Signature.....Date.....

Player Agreement

I have fully understood the 'Players Code of Conduct' and agree to abide by the rules therein.

Name (Print)Signature.....Date.....

