



THE FOOTBALL ASSOCIATION OF WALES Ltd

2018 – 2019 ACADEMY TRIAL REGISTRATION FORM (JA3)



SECTION A – PLAYER’S DETAILS

This section **MUST** be completed **IN FULL** in **BLOCK CAPITALS ONLY**:

Given Forename(s):-	Surname:-	
Name of most recent previous ACADEMY/JUNIOR CLUB & COUNTRY for which you were registered:-	Date of Birth:-	Nationality:-

Any player currently registered with an FAW Academy is not eligible to participate in a Trial for another Academy

Current Postal Address:-	Name of Current Junior Club:-	Place of Birth (Town & Country):-
Post Code:-		

The FAW is committed to safeguarding the privacy of your child’s personal data. The personal data supplied on this form is the minimum necessary for the FAW to register your child to play football (in any of its forms) under the governance of the FAW in accordance with our own Rules and Regulations and our obligation to comply with the rules and regulations set by FIFA and UEFA. Your child’s data will be held in accordance with data protection legislation and principles and as per the provisions of the General Data Protection Regulation (GDPR). The information that we are obliged to provide you in accordance with the provisions of the GDPR is contained on the Junior Player Privacy Notice which is attached to this form. An electronic copy of the Junior Player Privacy Notice can also be obtained at the link <http://www.faw.cymru/en/about-faw/domestic/registration-forms/> By signing this form you confirm the following:-

1. That you are the parent or guardian of the above-named child and that you have parental responsibility.
2. That you have received, read and understood the Junior Player Privacy Notice.

I hereby consent for my child to be registered as a Trial Player for the Academy detailed below.

Name of Academy:-	Age Group (Please Circle):- U10 U11 U12 U13 U14 U15 U16
Start Date of Trial Period:- <i>DD/MM/YYYY</i>	End Date of Trial Period:- <i>DD/MM/YYYY</i>

Please note that a Trial may only take place for a **maximum period of six weeks**.

Please note that an academy may have a maximum of **two players on trial at any one time per age group up to a total maximum of four per season**

SECTION B – PARENT/GUARDIAN DETAILS & SIGNATURES

This section **MUST** be completed **IN FULL** in **BLOCK CAPITALS ONLY**:

Parent/Guardian Full Name:-			
Parent/Guardian Signature:-	Player’s Signature:-		
Date of Parent/Guardian Signature:-	Date of Player’s Signature:-		

SECTION C – CLUB DETAILS

This section **MUST** be complete **IN FULL** by the Academy Administrator in **BLOCK CAPITALS ONLY**:

Academy Administrator’s Name:-	Current Postal Address:-
	Post Code:-
Please provide an active email address:-	Recognised Signatory (Secretary or equivalent / Chairman or equivalent):-
	Date:-

THE ACADEMY ADMINISTRATOR MUST ENSURE THIS TRIAL REGISTRATION FORM IS SENT TO THE REGISTRATIONS DEPARTMENT OF THE FAW FOR PROCESSING WITHIN FIVE (5) BUSINESS DAYS OF THE DATE OF THE PLAYERS SIGNATURE