

Footballers Read and Write Programme Challenge



Application Form

Name and surname of participant: ______

Date of Birth:				
College and school:		./		
Home and Mobile Number:		_/		
Email Address:				
Home Address:				
Parent's/Guardian's Consent:				
To comply with the General Data Protection Education Act (S.L.440.09 – 2015) and its secollection and use of personal data, photo Such personal data, photos and/or video repromotional purposes. Your data, photos on to third parties without your prior constant/or video recordings will be deleted, we you can withdraw consent at any time how	subsidiary legislation, os and/or video recordings will only be and/or video recordings. After completion within a period of 5 yes	the Agency requires ydings. Sused by the Agency for some suit of the used for of the activity or init ars.	your permission for training and or any other purp ciative all person	to authorise the programme cose or passed al data, photos
Please tick the statements below, sign and	d date the form and e	mail it to the Agency.		
give permission for my son/daughter to p	participate in the FRV	/P Challenge:	YES	NO
give the Agency permission to collect and	d use my data and/or	my child's data:	YES	NO
give the Agency permission for my and/o	or my child's photogra	phs to be used		
in printed publications that the Agency produces for promotional purposes: YES _				NO
give the Agency permission for my and/o	or my child's image ar	nd/or video recordings	;	
to be used on the Agency's website and so	ocial media pages, na	mely Facebook:	YES	NO
give the Agency permission for my and/o	or my child's photogra	ph and/or		
video recordings to be utilised by local me	edia particularly telev	sion stations:	YES	NO
Parent's/Guardian's name & surname		Parent's/Guardian's ID number		
Parent's/Guardian's signature		Date		