



Toddington Rovers Football Club

Medical Conditions Form



Season 2021 – 2022

This form is to be completed by the Club Member and the Club Member's Parent/Guardian (if the Club Member is aged below 18). Any medical condition or allergy that may affect the Member's ability to train and represent the Club should be noted below. If any medication is regularly used by the Member, it should also be noted below.

Member's Name	
TRFC Team	
TRFC Team Manager	
Parent/Guardian's Name	
Parent/Guardian's Emergency Contact Details	

Condition	
Visible Signs	
Medication/ Corrective Action	

Condition	
Visible Signs	
Medication/ Corrective Action	

Any further conditions should be noted overleaf

.....
Signed (Player) Signed (Parent/Guardian) Signed (Manager) Date

WHEN COMPLETE, THIS FORM SHOULD BE PASSED TO THE CLUB CHILD WELFARE OFFICER, WHO WILL RETAIN THIS INFORMATION CONFIDENTIALLY AND ENSURE THAT ONLY THOSE WHO NEED TO KNOW ARE MADE AWARE OF THESE DETAILS.