



Family Membership

Parent/Guardian			
Name:			
Address:			
Mobile:			
eMail:			
Membership Type: Full/Apprentice/Student/Coach/Non Player			
Player:	Yes	No	If Yes, Date of Birth:
Medical information: (i.e. allergies, conditions, medication) which may impact on your health or welfare while participating in our activities:			

I subscribe to and undertake to further the aims and objectives of the Club and of the GAA/LGFA and to abide by its Rules.

- I understand the personal data on this form will be used by the club and the GAA/LGFA for the contractual purpose of registering (or re-registering) and maintaining my membership.
- I understand that my Personal Data will also be used for (but not limited to) purposes to maintain my membership including registrations, team-sheets, referee reports, disciplinary matters, injury reports, transfers, sanctions, permits and for statistical purposes. I understand that if I do not provide my Personal Data my Membership cannot be registered with the Club and the GAA/LGFA.
- Should any of this information change within the year the onus is on the member to inform the club.

I have read and agree to abide by the Club's [Code of Conduct](http://baltinglassgaa.wicklow.gaa.ie/pages/clubconstitution). (baltinglassgaa.wicklow.gaa.ie/pages/clubconstitution)

Signature:		Date:	
Print Name:			

I have read the important Data Protection information on the reverse of this form and have given my consent, by ticking the boxes and signing below, for my information to be used as follows (Please tick as appropriate):

- To provide me with updates regarding club activities such as matches, meetings and club events.
- To provide me with details of Club fundraising activities including Lotto, social occasions, ticket sales etc.
- I am aware that my photograph or video image may be taken whilst attending or participating in games or activities connected with the GAA/LGFA and I consent to it being used by the GAA/LGFA for items like match programmes, year books, match reports or on websites or social media channels associated with the GAA/LGFA

I understand that I can withdraw my consent at any time by writing to the Club or the GAA/LGFA.

I understand my rights under Data Protection legislation, as outlined on the reverse of this form

Signature:		Date:	
Print Name:			



IMPORTANT NOTIFICATION

The following Privacy Information is being provided to you as outlined in the General Data Protection Regulation. It is intended to inform you of how the personal information provided on this form will be used, by whom and for what purposes. If you are unclear on any aspect of this form, or want any further information, please contact the LGFA's Data Protection Officer (01 8363156 or dataprotection@lgfa.ie) or the GAA's Data Protection Officer (01 8658600 or dataprotection@gaa.ie).

Who is the data controller?

The Club and the GAA/LGFA are Joint Data Controllers of the Personal Data and contact details for the Club are Baltinglass GAA Club, Newtownsaunders, Baltinglass, Co. Wicklow.

Who is the Data Protection Officer for the GAA/LGFA and the Club?

Contact the relevant Data Protection Officer if you have any questions or wish to make any request in relation to your personal data. The LGFA Data Protection Officer is Paula Prunty - dataprotection@lgfa.ie or 01 8363156. Details of the GAA's Data Protection Officer are available on the GAA's website gaa.ie/dataprotection or by emailing dataprotection@gaa.ie or calling 01 8658600,

What is the purpose of processing my Personal Data?

The purpose for processing your Personal Data is that it is necessary for the performance of a contract in order to register and maintain your membership with the club and the LGFA. The purpose is also to keep you informed of GAA/LGFA events and fundraisers. We will only use your personal data for this if you have provided your explicit consent when signing this form.

Will anyone else receive a copy of my Personal Data?

Your personal data can be accessed only by appropriate members of the County boards, Provincial boards and National Administrative function. This will be done in accordance with our data protection policy only. In the event of an injury claim, details of your claim which will include your personal data will be passed to the relevant Injury Fund Administrator.

Where is your Personal Data stored?

Your data will be stored electronically on the LGFA Membership Database which is provided by Servasport Ltd, 11th Floor, Causeway Tower, 9A James Street South, Belfast, BT2 8DN.

Who is Servasport Limited?

Servasport Limited is a "data processor" who hosts the database on which your information is stored. We have a contract in place with Servasport Limited to ensure your personal data is stored safely and securely.

How long will your Personal Data be stored for?

Your personal data will be held for as long as it is necessary and it has a purpose. This will vary depending on your club and their archiving needs. Please speak to your club for their specific membership retention policy.

How can I obtain a copy of the Personal Data held by the Club/GAA/LGFA?

You have the right to request a copy of all of your personal data and can do so by contacting us. This information will be provided to you within one month.

What are my privacy rights relating to my Personal Data?

You have the right to have your personal data updated, rectified, or deleted. You have the right to object to your personal data being processed and to withdraw your consent to processing - You can do so by contacting us.

Where can I get further information?

Further information regarding your rights can be obtained through the **Office of the Data Protection Commissioner, Canal House, Station Road, Portlannington, Co. Laois**, or on the website www.dataprotection.ie

How do I make a complaint or report a breach?

Should you wish to make a **complaint or report a breach** under in relation to your Personal Data, you can do so by emailing the Office of the Data Protection Commissioner using the following email address: info@dataprotection.ie



Other Family Members

Family Member			
Name:			
Address (if different):			
Mobile (if different):			
eMail (if different):			
Membership Type: <small>Full/Apprentice/Student/Coach/Non Player/Juvenile</small>			
Player:	Yes	No	If Yes, Date of Birth:
Medical information: <small>(i.e. allergies, conditions, medication) which may impact on your health or welfare while participating in our activities:</small>			

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eMail (if different):			
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