| Per arous surgo in spec | Elphin GAA Club Child/Youth Membership Application Form | Per artota strigo in spec |
|--|--|------------------------------------|
| | | |
| /// Gender: | | |
| | ake to further the aims and objectives of (Association and a context of the second stress of the second stress and the second stress of | ciation) to abide by its Rules |
| http://gaa.ie/the-gaa/chi | Id-welfare-and-protection / | |
| Sínithe/Signed | Dáta: | |
| We/I consent to t | behalf of the above named: the above Application and to undertakings give the personal data on this form will be used by of registering (or re-registering) and maintaining | the Club and the Association for |
| | that the Personal Data will be retained by the Membership subsists and for a reasonable peri | |
| Association and their Per | that I can resign the Applicant's Membership b sonal Data will then be erased except where th n such Personal Data (e.g. for child safeguardin | e Club or the Association has a |
| maintain their Membersh | that the Applicant's Personal Data will also be hip including club and team administration, regi ers, injury reports, transfers, sanctions, permits | strations, team sheets, referee |
| We/I understand registered with the Club a | that if I do not provide the Applicant's Persona and the Association. | ll Data their Membership cannot be |
| Sínithe/Signed | (Parent/Guardian) | Dáta: |
| | | |

Medical Information

Please outline any medical information (i.e. allergies, conditions, medication) which may impact on your child's health, welfare or behaviour while participating in our activities.

| I consent to the processing of the personal medical data as outlined above for the purpose of administering medical assistance to my child if required. |
|---|
| In the event of illness/injury, I give permission for medical treatment to be administered by a nominated first aider, or by suitably qualified medical practitioners. |
| If I cannot be contacted and my child requires emergency hospital treatment, I authorise a qualified medical practitioner to provide emergency treatment or medication. |
| Sínithe/Signed (Parent/Guardian) Dáta: |
| Parent or Guardian's contact telephone number:Email:Email: |
| 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 on my own behalf and on behalf of my child with updates regarding Club activities such as games, training, meetings and club events |
| To provide me with details of Club fundraising activities including, social occasions, ticket sales etc. |
| I am aware that my child's photograph or video image may be taken whilst attending or participating in games or activities connected with the Club and I consent to it being used in the promotion of Gaelic Games, print, online/digital and social media mediums of communication My contact preferences are as follows: |
| Email SMS text message Other |
| I understand that I can withdraw my consent at any time by writing to the [Club or my Association]. I understand my rights under Data Protection legislation, as outlined on later on this form Sínithe/Signed: Parent/Guardian) Dáta: |
| Print Name: |
| Signature of Full Member Proposing New Member |
| Dáta |
| Print Name |
| Signature of Full Member Seconding Proposal Dáta |
| Print Name |
| For Official Use only: Registered in Central Membership Database on Membership Identification Number: |

Upon election, your membership details will be entered on the Association's membership database in accordance with Rule.

IMPORTANT NOTIFICATION AS IT WOULD APPLY TO THE GAA

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 GAA's Data Protection Officer (01 8658600 or dataprotection@gaa.ie).

Who is the data controller?

The Club and the GAA are Joint Data Controllers of the Personal Data and contact details for the Club are as follows Elphin GAA Club Elphin <u>secretary.elphin.roscommon@gaa.ie</u>.

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

Details of the GAA's Data Protection Officer are available on the GAA's website gaa.ie/dataprotection. You can contact our Data Protection Officer by emailing dataprotection@gaa.ie or by calling 01 8658600, if you have any questions or wish to make any request in relation to your personal data.

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 GAA. The purpose is also to keep you informed of GAA events and fundraisers. We will only use your personal data for this second purpose if you have provided your explicit consent for this by ticking the boxes on this form and indicated your contact preferences and signed below those boxes. If you provide your child's medical information and your explicit consent for the Club to process this information this information shall only be processed for the purpose of administering medical assistance and where necessary the information provided shall be shared with qualified medical practitioners.

Will anyone else receive a copy of my Personal Data?

Your Personal Data can be accessed by certain members of the County Committees, Provincial Councils and the Central Council of the Gaelic Athletic Association in connection with their administrative functions. This will be done in accordance with our data protection policy only. In the event of an injury or insurance claim, details of your claim which will include your Personal Data will be passed to the GAA's Insurance underwriters, Willis Towers Watson Insurance, Elm Park, Merrion Road, Dublin 4, Ireland.

Where is your Personal Data stored?

Your personal data will be stored in the Club and electronically on the GAA 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 the duration of your Membership and it will be deleted by us shortly thereafter in the event that you resign your Membership or you are expelled in accordance with the Official Guide. However, we may retain your Personal Data after your Membership ceases if we decide that it is strictly necessary and proportionate to do so in the circumstances in accordance with our data retention policy.

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

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 also have the right to have your Personal Data updated, rectified, or deleted if you so wish. 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 at the details above.

Where can I get further information?

Further information regarding your rights can be obtained through the Data Protection Commission, Canal House, Station Road, Portarlington, Co. Laois, or on the website <u>www.dataprotection.ie</u>

How do I make a complaint or report a breach?

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