

## **UKDA MEMBERSHIP APPLICATION FORM**

## TO BE COMPLETED BY ALL SUPER LEAGUE PLAYERS

	APPLICANTS DETAILS	(PLEASE COMPLETE I	N BLOCK CAPITA	LS)	
NATIONAL LEAGUE TEAM	۸:			SEASON: 20 _	/ 20
	eam: ,				
·	Forename: _		Preferred Name: _		
MALE FEM.	ALE (please tick appropria	ate box)	DATE OF BIRTH: _	/	/
Home Address (in full):	ř.				
County:	Postcode:	Contac	t Number:		
EMAIL ADDRESS (manda	tory for all communications):	×	56		
(such as receiving UKDA in	nformation, offers and competitions)				
PLEASE TICK THIS BOX to	'opt out' of marketing from Darts Corne	r and other UKDA partners			
DO YOU WISH TO BE	CONSIDERED FOR THE NATIONA	AL LEAGUE TEAM NAME AB	OVE? YES		NO
	PLAYERS UNDER 16 - PARE	NT / CARER MUST COMPL	LETE AND SIGN H	ERE	
Surname:	Forename:		Signature:		
Home Address (in full):					
County:	Postcode:	Con	tact Number:		
EMAIL ADDRESS (manda	tory for communication):				
•	nformation, offers and competitions)				
PLEASE TICK THIS BOX to	'opt out' of marketing from Darts Corne	r and other UKDA partners			
SOCIAL M	IEDIA (we will use these perso	nal channels to tag player	rs to communicat	e performance	s)
Twitter Username: @	Facebook Use	rname: @	Instagram Userr	name: @	
	MY DECLAR	RED COUNTRY OF NATIONA	ALITY		
ENGLAND	SCOTLAND WALES	OTHER	(please specify)		
(Must be your own, your p	parent's or your grandparent's country	of birth or where you have reside			
	FOR THE CURF	RENT SEASON HAVE YOU T	O DATE:		
= -	League team member in any other UK	(DA National League Team?		YES (	NO (
If yes, which Team:	nal League registration form for anothe	==/		VEC	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
If yes, which Team:				YES	NO
C) Declared that you are	available for selection for another UKD	DA National League Team?		YES	NO
If yes, which Team:		_			
signed a UKDA National I	a Super League player in another UKI League registration form with that Tea nber Team you wish to nominate for the	m in the current season, then you	u must 2. UKDA N	SUPER LEAGUE CU NATIONAL SINGLES NATIONAL PAIRS	
Only ONE UKDA Nationa	al League Team can be nominated a l of the Member Team play-offs listed	as a PRIORITY TEAM for the U	NOMBLATE	D PRIORITY NATIONA	L LEAGUE TEAM
	UKD	A PRIVACY STATEMENT			
processed, maintained, upo	tion of the data we hold about you as a r dated and retained in accordance with cur . Privacy and GDPR policies on our websit	rent and future UK and EU Data Pro	otection Legislation.		securely stored
		DECLARATION			
By returning this completed	I form I confirm that I am in agreement wit d form I confirm that I have read and unde abide by the Code of Conduct within the UP	rstood the Privacy and GDPR policie	es and how data will be	used and	tick box to agree
PLAYERS SIGNATURE: _			DATE: _	/	/
TEAM SECRETARY:	SIGNA	TURF:	DATE:	1	1