



Westport Golf Club - Player Consent Form

Name: _____

Email Address: _____

Mobile: _____ Date of Birth: _____

We use the information above to be able to communicate with you in relation to WESTPORT GOLF CLUB events and activities associated with our Junior Golf Development Programmes. We will not share this information with any external Data Processors, other than the Irish ladies Golf Union, who adhere to our privacy policy. A copy of the ILGU privacy policy can be found online at www.golfnet.ie/privacy-policy.

'I agree to you retaining my data for this purpose'

Yes No

We would like to **retain your data** to enable us to send you information about future events and/or contact you in relation to social activities at the Club. If you are happy for us to do this please tick this box; 'I agree to you retaining my data for this purpose'

Yes No

I consent for **photographs and video** taken during or at golf related events to be published. These images could be used in print and digital media formats including print publications, the WESTPORT GOLF CLUB Website or on social media. The images could be distributed to third parties such as media partners, newspapers and magazines.

'I consent to you using my data for this purpose'

Yes No

'I confirm I am over the age of 18 and have read, understood and agree with the way my data will be used by the WESTPORT GOLF CLUB - ***If under the age of 18 a parent or guardian must sign this form on your behalf.***

If you need any further information please write to the General Manager at WESTPORT GOLF CLUB, Carrowholly, Westport, Co. Mayo.

Signature: (Entrant / Guardian) Delete as appropriate

Date:

Print Name: _____