



MASCOT INFORMATION FORM

Scunthorpe United v _____ on DATE, MONTH, 20__

Mascot's Name: _____ Age: _____

Parent's Name: _____

Address:

Contact Number: _____

Email Address: _____

School: _____

Hobbies: _____

Favourite Iron Player: _____

PERMISSIONS DECLARATION

I give permission for my child's name and photograph to be used in the matchday programme and on social media.

In addition, I give authority for the club to use the supplied details, such as school, hobby and favourite player. Any of those details you do not wish to be published are to be left blank. Please note, for the avoidance of any doubt, any contact information given will not be published.

Parent / Guardian Name: _____ Signed: _____

***Please return this completed form, along with a photograph to Glyn Sparks,
Scunthorpe United, Glanford Park, Scunthorpe, DN15 8TD or email it to
glyn.sparks@scunthorpe-united.co.uk***