



Registration Form

G8 Soccer School, 1 Beech Drive, Calderstones, Whalley, BB7 9RA
Telephone: 07768 557797
Email: info@g8soccerschool.co.uk and G8soccerschool@hotmail.com
Web; www.g8soccerschool.co.uk

Name _____

Male/Female (delete) _____ Club _____

Age _____ DoB _____ Position/ Club _____

Address _____

Postcode _____ Tel No _____

Emergency Tel No _____

Email _____

Course Date to Book:

PLEASE INDICATE ANY HEALTH PROBLEMS, MEDICAL CONDITIONS, INJURIES, ALLERGIES OR SPECIAL NEEDS (If required please send separate sheet)

Please ensure you have enclosed signed Consent Form

Payment Details

G8 Soccer School operates a no refund policy, and all payments must be received prior to course to secure a place.

Punctuality

We ask that children are dropped off and picked up punctually.

Code of Conduct

Children are asked to comply with a code of conduct set out by the coaches. Children who seriously breach the conduct will be removed from the course.

Feedback

Your feedback is very valuable to us. If you have any comments or suggestions about the services, please contact G8 Soccer Schools at above address or by email so we can improve our service.



Consent Form

I give consent for my child to take part in the activity and to any emergency treatment as necessary.

My child understands that it is important, for safety reasons to obey any rules and instructions given by the staff in charge of the activity.

I understand G8 Soccer School is not liable for any personal loss or injury which the above-named participant, or any spectators accompanying them may sustain while attending coaching sessions. Nothing in this undertaking shall operate to exclude or limit liability of G8 soccer School for Death or personal injury which cannot be excluded by law.

I consent to my child travelling in a motor vehicle driven by a member of staff or any other adult in the event of an emergency.

I agree to bring my child to G8 Soccer School and collect him/her at the beginning and end of the activity.

A photographer/ Video operator may be present to take photography/film/video, which G8 Soccer School may use for promotional purposes. I give permission for my child to be photographed /filmed/videoed. No names of children will accompany images.

YES

NO

I will inform G8 Soccer School of any changes to our address, telephone numbers and contact names and details given prior to the course

I have read and accept the conditions and confirm that I am legally entitled to give consent.

Signed: _____ **Date** _____

Relationship to Child _____

Print Name _____