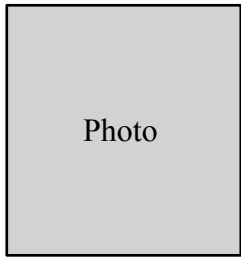




Football Samurai Academy Application Form



Tick the course box you would like to attend	<input type="checkbox"/> Samurai Course Two times training League/Cup	<input type="checkbox"/> Normal Course One time training League/Cup	<input type="checkbox"/> Double Practice Course Two times training	<input type="checkbox"/> Practice Course One time training
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Name	(First name)	(Middle name)	(Surname)
Date of Birth		Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female
Category	<input type="checkbox"/> U5/U6 <input type="checkbox"/> U7 <input type="checkbox"/> U8 <input type="checkbox"/> U9/10 <input type="checkbox"/> U11/12 <input type="checkbox"/> U13/14 <input type="checkbox"/> U15/16 <input type="checkbox"/> U17/18		
Position	<input type="checkbox"/> FW <input type="checkbox"/> MF <input type="checkbox"/> DF <input type="checkbox"/> GK	Preferred foot	<input type="checkbox"/> Right <input type="checkbox"/> Left <input type="checkbox"/> Both
Reason for Applying			
Address			
School			
Telephone		Email	
Guardians Name('s)	(First)	(Second)	
Work Contact	Company Name Address		TEL
Emergency Contact	(First)	(Second)	
Sibling('s)	Name	Name	
	Age	Age	
	School	School	
Other Activity	() Day:	() Day:	() Day:
Entrance Date			

A Signed Memorandum

I understand and agree that the person participating in Football Samurai organised events entirely at their own risk.

Guardian('s) Signature		Player Signature	(If required)
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Date: