

# **STRETTON RED ROVERS & FOOTBALL FRENZY 2009**

## **REGISTRATION FORM**

to be completed by parent or guardian in BLOCK CAPS



CHILD'S SURNAME :

CHILD'S FIRST NAME :

CHILD'S DATE OF BIRTH :

CHILD'S ADDRESS inc. Postcode: |

HOME 'TEL NUMBER (inc. Code) :

EMERGENCY 'TEL NUMBER :

*where YOU can be contacted during session times*

EMAIL ADDRESS :

(OPTIONAL - BLOCK CAPS)

### **DECLARATION:**

- I understand that football is a physical/contact sport and as such there is a risk of personal injury to my child named above.
- I agree to accept the risks involved to my child during Stretton Red Rovers football activities and will not hold the club or its organisers responsible individually or as a group for any injury howsoever caused.
- I have supplied, in confidence, any additional information relating to any special health or physical conditions affecting playing ability and/or performance of the child named above (details on separate sheet please).
- I would also be interested in my child doing (tick as appropriate):-

**Joining**  **Playing**  **Playing**  **Only the**   
**Red Rovers** **friendlies** **league** **Frenzy**

*(PARENT/GUARDIAN)*

**PRINT NAME :**

**SIGNATURE :**

**DATE :**

PLEASE ENSURE THE FORM IS SIGNED, DATED AND RETURNED WITH £15 FEE  
**AT YOUR FIRST SESSION OR POSTED TO ADDRESS BELOW IN ADVANCE.**  
**\*NOTE PRE-BOOKED PLACES (ARRIVING BY WEDS JUNE 3<sup>RD</sup>) ARE ENTERED INTO PRIZE DRAW FOR A 6 WEEK JUNIOR SPORT COURSE AT LUDLOW LEISURE CENTRE**  
(Post to: 183 Watling St., South, Church Stretton, SY6 7BJ - Tel: 01694 723543)