

RAW SOCCER REGISTRATION FORM

Please complete in BLOCK CAPITALS and return to the address below

First name: Surname:

Address:

..... Post Code:

Date of birth: Age at registration:

Home tel no. (inc STD):

Mobile tel no.:

Emergency tel no.:

(We do need at least two contact numbers)

E-mail address

Which school do you attend:

Have you attended a Raw Soccer Course before? YES NO

Do you suffer from any illness or disabilities which should be brought to our attention?

YES NO

If YES, please give details:

.....

Name and telephone number of family doctor:

Terms and Conditions:

All forms must be received three days before the start of the course. Places are limited. All cancellations carry a £5 administration fee. No refunds will be given. Credit notes will be issued on receipt of a written request at the discretion of management. We do not accept responsibility for loss or damage to property. Children attending the courses should not be left unsupervised at the venue until 15 minutes before and after the course day starts and ends.

Declaration by parent or guardian:

I wish for my son/daughter to be accepted on the above course, and I agree to the terms and conditions and confirm that any medical condition which may affect my child's participation on the course has been fully disclosed.

Health and safety/child protection:

I also give permission for Raw Soccer to take and use photographs of my child for Raw Soccer marketing purposes, administer first aid if necessary, and to transfer my child to hospital should an emergency arise.

Name: Signature: Date:

Please select and complete one of the two options below:

I enclose a cheque/postal order payable to "Raw Soccer" for £ Cheques only accepted upto £50 with valid cheque guarantee card.

Please charge my credit/debit card account for £ Card holder's name:

Visa/Mastercard/Switch Maestro number: /..... /..... /..... Valid from: /..... Expiry date: /.....

Switch issue number: Security code (last three digits on signature strip on back of card):

Please write your child's name and booking code on the back of the cheque in top left corner, and return remittance and completed form to:
Raw Soccer, 15/17 Pinbush Road, South Lowestoft Industrial Estate, Lowestoft, NR33 7NL

Please tick if you would NOT like to receive future mailings from Raw Soccer / Adventure Island Play Park

Raw Soccer Units 15/17 Pinbush Road, South Lowestoft Industrial Estate, Lowestoft, Suffolk, NR33 7NL

Company registration number: 4943433 VAT registration number: 831 9852 07

CROSS THE WHITE LINE... JUST PLAY