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| --- | --- |
|  Child’s Name  | Child’s DOB |
| Child’s current football team / previous football history. What position does the child play in ? |
| Does the child have any current/ previous medical conditions? Please provide details |
| Name, address and email of person completing the booking form if different from parent |
| Parents/ Carers Name/s | Email address |
| Home Address |
| Emergency Contact Details |
| What date / time would you like to book? What is the occasion? *(We do try our best to give you the date/time required but this is subject to availability)* |
| Tick or enter yes in this box if you agree that MossFC can take videos and photographs of the child during coaching for use on our website / social media |  |
| Please tick or enter yes this box if you would like to hear from us in the future with offers, news and updates |  |
| Please tick or enter yes this box if you would be interested in small elite group training during school holidays in the future |  |
| Where did you hear about us?Online / word of mouth / Facebook etc |  |
| Signed by person booking/ Typed is fine | **Date** |

*When a date / time has been agreed, we will email you an invoice to pay, once payment is received we will email you the gift certificate to print and give to the child.* ***Alternatively, if you do not want to book the date/time yourself, we can issue a gift certificate with a 3 month expiry date to book on****.*