

# Pro Goalkeeping Course 2016

Name \_\_\_\_\_

Club / Team \_\_\_\_\_

Age \_\_\_\_\_ D.O.B. \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Telephone (inc STD) \_\_\_\_\_

Emergency Telephone (inc STD) \_\_\_\_\_

Additional / Medical Information \_\_\_\_\_

Please Tick :

**Residential:**   
(£225 pp)

**Non-Residential:**   
(£110 pp)

(If you have selected residential you will also need to fill out the Venue Health and Safety form which includes dietary requirements)

Suitable clothing must be worn and packed lunch will be required for non-residents.

Cheques made payable to: **NCF Courses Ltd**

Send Payment and Booking Form to:

**N.C.F. Courses Ltd, 22 Crofton Way  
Newcastleupon Tyne, NE15 8QF**

I enclose a cheque / postal order (with your address on the back of your cheque) for the correct amount of:



It is understood that it is the parent/guardian's responsibility to inform Newcastle Community Football if their son/daughter will not be present on any day of the course.

UNDERTAKING: it is understood that Newcastle Community Football cannot be liable for any personal loss or injury which the above named applicant may sustain whilst attending the Football Coaching Courses. It is also understood that it is the parent/guardian's responsibility to inform Newcastle Community Football of any medical condition that could affect a child's participation in any activity. Please give further details if appropriate. In the event that my son/daughter is injured whilst attending the course and I cannot be contacted on the above numbers, I give my consent for my child to receive medical attention. I also give consent that any photographs taken by staff at the sessions may be used for future publicity purposes.

Signed Parent/Guardian \_\_\_\_\_

Date \_\_\_\_\_