Hunt FA Booking Form

Child's Forename:		Child's Surname:
D.O.B:		Age:
Parents/Carers Name:		Relationship to Child:
Address:		
Postcode:		
Home Telephone Number:		Mobile Telephone Number:
Emergency Contact Name and Number:		
E-mail address:		Days attending:
		Amount enclosed:
Special Requirements: e.g. in groups with friends:		
Please note that where ever we can these requirements will be met but this might not always be possible.		
Does your child have any		
medical conditions or take medication?		
Apart from yourself, who is authorised to collect your	Name:	
child?	Tel:	
Is your child allowed to make his/her own way home? Yes ☐ No ☐		
Name of Club child plays for:		
Please bring lunch, snacks and drinks also suitable clothing for participants		
Parents/Carers		
My child is in good health and I consider him/her capable of taking part in the course.		
In the event of any injury or illness all reasonable steps will be taken to contact me.		
 Coaches and supporting staff will take every precaution to ensure that accidents do not happen, however they cannot be held responsible for any loss, damage or injury suffered to 		
my child.		
Photographs may be taken during the activity for promotional purposes. This information will remain applied to the activity of promotional purposes.		
 This information will remain confidential to Huntingdonshire Football Association Ltd. The event operates on a first come, first served basis and is subject to cancellation and change. 		
Parent/Carer Signature: Date:		