



# WRITTLE MINORS YOUTH FOOTBALL CLUB











FOUNDED 1969

## Summer 2009 Soccer Fun School

**Writtle Minors Youth Football Club** will be running a Summer Soccer Fun School from Monday 24th to Friday 28th August inclusive from 10am to 3pm daily (Friday is Finals Day, followed by the presentations which will start about 3pm and last an hour). The course is open to boys and girls between the ages of 6 and 13 years old. Girls will form their own section, numbers permitting.

Glen Wilkinson from a local Development Centre will once again be running the Soccer School on our behalf. Players that excel may be offered a place at the Centre by Glen.

If you wish to send your youngster on the Course please fill out BOTH SIDES of the form below and return it along with payment to your Team Manager or Coach. One form per child, please ask if you require extra forms or copy this one.

-  Coaching of skills and techniques to improve all round ability
-  Individual Skill Competitions
-  Team competitions (World Cup Tournament, European Cup Tournament)
-  FREE Summer Fun School Football Shirt, Shorts and Football
-  Professional photographer will take action and group photographs
-  Football Fun Inflatables
-  Supervised break for lunch (Please bring packed lunch and plenty to drink)
-  Two CRB checked Mums in attendance looking after children's welfare
-  Professional Footballer at presentation
-  All Coaches are CRB checked

***Please apply as soon as possible, as late applications may lead to disappointment if places are no longer available.***

## WRITTLE MINORS Summer 2009 Soccer Fun School

Please reserve a place on the course from \_\_\_\_\_ to \_\_\_\_\_ days

### Personal details

Full name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Age: \_\_\_\_\_

D.O.B: \_\_\_\_\_

Tel No: \_\_\_\_\_

### Payments

Full Week (5days)	£60
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Completed booking forms/payments to be handed to Manager or Coach or send to Steve Frostick, Bleak House, Edney Common, Chelmsford CM1 3QE (01245 248704)

I have enclosed a cheque for the sum of £60 made payable to Writtle Minors Football Club. I HAVE ALSO COMPLETED THE EMERGENCY CONTACT / MEDICAL DETAILS AT THE REAR OF THIS SLIP.

Signed: \_\_\_\_\_ (Parent/Guardian)



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### IMPORTANT

PLEASE ENSURE THE SECTION BELOW IS COMPLETED BEFORE  
BEING HANDED BACK TO YOUR COACH/MANAGER

#### Contact details

Parent / Guardian Names: \_\_\_\_\_

Address: \_\_\_\_\_

Tel No: \_\_\_\_\_

#### Emergency Contact 1

(for Training and Match Days if above unavailable)

Name: \_\_\_\_\_

Tel No: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

#### Emergency Contact 2

(for Training and Match Days if both of above unavailable)

Name: \_\_\_\_\_

Tel No: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

PERMISSION IS HEREBY GIVEN THAT SHOULD NONE OF THE ABOVE BE CONTACTABLE A REPRESENTATIVE FROM WMFC IS AUTHORISED TO OBTAIN EMERGENCY TREATMENT FOR MY CHILD.

Signed: \_\_\_\_\_ (Parent / Guardian)

#### Medical details

Current Medical Conditions: ie. Asthma\*, Allergies (GIVE DETAILS OF MEDICATION) \_\_\_\_\_

Previous Medical Conditions / Date: ie. Broken limbs etc. \_\_\_\_\_

Known allergic reactions to medication: \_\_\_\_\_

Last Tetanus injection date: \_\_\_\_\_

Any information you feel would be of help in the event of hospital treatment: \_\_\_\_\_

DETAILS WILL BE HELD WITH STRICTEST CONFIDENCE

\*Please supply us with a spare "Named" Inhaler.