London Football Academy Egypt (LFAE)
Application form 2012

- **The Club/School:** ..... **Sport:** .....

Part 1: To be completed by the Player

☐ Male ☐ Female

First Name: ..... Middle Name: ..... Last Name: ..... Nick Name: .....

Date of Birth: ...../...../.....

- **Contact Details:**

Phone: ..... Mobile: .....

E-mail Address: .....

- **Sports school age group:**
  - □ 5-7yrs Basic Training
  - □ 8-10yrs Developmental Training
  - □ 11-12yrs Advanced Training
  - □ 13-14yrs Performance Training
  - □ Other

Part 2: To be completed by the Parent/Guardian

First Name: ..... Middle Name: ..... Last Name: ..... Title: .....

E-mail Address: .....

- I confirm that my child is healthy and medically fit to participate in (LFAE) .
- I agree to the appearance of my child 's photos/videos in (LFAE) Publications / Website / Social Networks

Relationship: Signature:	Mobile: Date: / /
Emergency Contact:	

Part 3: Payment Details HSBC Bank

Account Name: London Football **Account Number:** 032 – 080830 – 001

Part 4: For office use ONLY

Application Received Application Accept Photo Received

Name & Signature:	Date: / /