



CUMBERLAND UNITED FOOTBALL CLUB GOALKICK PROGRAM

BOOKING FORM

The completed booking form and the \$125 GoalKick payment can be provided on the first date of the program. Payment can be by cash or card.

PLAYER/CHILD'S DETAILS

Childs Full Name:

Date of Birth:

Family email address:

Primary School:

Country of Birth:

How did you find out about this program?

PARENTS/GUARDIANS CONTACT DETAILS

Mother's Name:

Mobile Number:

Father's Name:

Mobile Number:

Cumberland United Football Club accepts no responsibility for any costs incurred from injuries. We recommend that players have private medical insurance and ambulance cover.

Signature of Parent/Guardian:

Date: