



TALENT DAY

The AFL in consultation with the Fremantle Dockers have established a Next Generation Academy (NGA) across Western Australia. The aim of the NGA is to identify and develop young talent, introduce kids to school and community football competitions and feed into the existing program in Western Australia.



WHEN

Monday 3 July 2017

WHERE

East Fremantle Oval, Moss Street, East Fremantle

TIME

Registrations from 10am and closing presentations at 1pm

WHO

Boys and girls in Year 6 & Year 7

REGISTRATIONS

Please complete form on the back of the flyer and return via email to ffcnga@fremantlefc.com.au

WHAT TO BRING

Football Boots, water bottle and football training attire

COST

\$40 per child



Proud Major Sponsors

Due to Next Generation Academy participants being under the age of 18 this form must be filled out by a parent or guardian of the individual registering.

PARTICIPANT'S DETAILS

Legal first name: _____ Family name : _____

Date of Birth : _____ Gender (please circle): Male / Female

Registering As : _____

Address: _____

Suburb: _____ State: _____ Postcode: _____

The participant has lived at this address continuously since (date): _____

Telephone Number (Mobile): _____

Email: _____

Participant's Place of Birth: _____

Is the participant from Aboriginal and/or Torres Strait Islander origin? (please tick) Yes No

Were any of the participant's parents born overseas? (please tick) Yes No

Is there a language other than English spoken at the participant's home? (please tick) Yes No

If yes to the above, which language is spoken? _____

PARENT/GUARDIAN DETAILS

Parent / Guardian First name: _____

Parent / Guardian Surname: _____

Parent / Guardian Telephone Number: _____

Parent / Guardian Email: _____

Birthplace of participant's mother: _____

Birthplace of participant's father: _____

OTHER DETAILS

School Name: _____

School Suburb: _____

Has the participant registered at any other AFL Club Academy previously? _____

Has the participant ever registered for any community football club before? _____

PAYMENT DETAILS

Visa MasterCard Cheque (enclosed) Payment amount: _____

Card No: / / Exp Date:

Card Holder's Name

Card Holder's Signature

X

Terms and Conditions

- This document will be a tax invoice when payment is received. Please retain this document so you can claim your input tax credits associated with this purchase
- It is your responsibility to ensure sufficient funds are available in your account for a debit to be made. If insufficient funds are available you may incur fees or charges

Privacy Statement

Your privacy is important to us. The information you provide to the Fremantle Football Club on this form will be handled in accordance with the club's privacy policy. To view the privacy policy please visit fremantlefc.com.au/privacy or call the Membership Services Team on (08) 9433 7111 to request a copy.

For any queries please email ffcnga@fremantlefc.com.au or phone (08) 9433 7100

Please complete the form and return via email to ffcnga@fremantlefc.com.au