



Soccer Holiday Programme:
Boys and Girls: 9th – 12th Grade January 2007:

Name _____

Date of Birth _____

Address _____

Club played for 2006 _____ **Grade** _____

Parents/ Guardian

Name _____

Contact Phone (03) _____ **Mobile** _____

Email _____

Method of payment

Amount \$ 140 (x1 child)
 \$270 (x2 children)
 \$390 (x3 Children +)

Cash **Cheque**

(Cheques to be made out to Howzat Indoor Sports Centre)

Waiver of Liability

I give permission for my child to attend the Soccer Holiday Programme run by the Howzat Indoor Sports Centre. The Howzat Indoor Sports Centre coaching staff will act on my behalf and notify me straight away if there are any pressing issues that arise during the course of the Soccer Holiday Programme training times between the dates of 22.01.07 – 26.01.07. I hereby waive and release all coaches, Howzat Indoor Sports Centre and staff from any liability of injuries sustained to my child whilst in attendance of the Soccer Holiday Programme. I accept full responsibility for my child's medical bills and associated expenses as a result of injury or illness sustained whilst in attendance at the Soccer Holiday Programme.

Parent/ Guardian Signature: _____ Date: _____

Please send completed registration form and payment to:
Howzat Indoor Sports Centre
Soccer Holiday Programme – 2007
PO Box 80196, Riccarton, Christchurch