

# THE CHAMPS SOCCER SCHOOLS REGISTRATION FORM

On completion of this form, a place will be secured on the course specified for seven days, of which payment of N5000 registration fees by cheque or at the designated banks must follow. Cheques should be made payable to Deportivo Vandyke International Limited. A duplicate copy of the bank teller should be submitted with the completed form.



<b>DATE</b>		<b>Does your child suffer from any health problem that we should know about? If so, what medication is taken?</b>	
<b>NAME</b>			
<b>GENDER</b>			
<b>DATE OF BIRTH</b>			
<b>SCHOOL</b>		<b>Is your child allowed to go home unescorted?</b>	
<b>HOME ADDRESS</b>			
<b>NATIONALITY</b>		<b>Is this your first soccer school?</b>	
<b>STATE OF ORIGIN</b>			
<b>HEIGHT</b>			
<b>WEIGHT</b>			
<b>BLOOD GROUP</b>		<b>I allow The Champs Soccer Schools to use the photos of my child for promotional uses?</b>	
<b>ALLERGIES</b>			
<b>FATHER'S NAME</b>			
<b>MOTHER'S NAME</b>			
<b>HOME PHONE</b>		<p><i>The Champs Soccer Schools are NOT LIABLE for any injury sustained by my child/ward during the activities of the training sessions and matches. I authorize the Management of The Champs Soccer School to obtain medical treatment for my child/ward in the event of an injury while attending training.</i></p> <p>..... PARENT'S/GUARDIAN'S SIGNATURE</p>	
<b>CELL PHONE</b>			

### OFFICE USE ONLY

<b>BANK</b>	
<b>TELLER NUMBER</b>	
<b>COMMENTS</b>	
<b>ACCEPTED/REJECTED</b>	

**MAKE PAYMENT TO STERLING BANK ACCOUNT:**  
**ACCOUNT NAME: DEPORTIVO VANDYKE (SPORTS CAFÉ)**  
**ACCOUNT NUMBER: 224631680112**

Please send completed forms and bank-tellers to:  
 Deportivo Vandyke International Limited  
 2nd Floor, Total Building  
 Agungi Bus-Stop  
 KM. 16 Lekki-Epe Expressway  
 Lekki Peninsular,  
 Lagos State  
 Nigeria.

