

Claremont Tigers FOOTY CLINICS 2016

July School Holidays



Specialist Coaching Clinics & School Holiday Fun

For Boys and Girls. Full coaching & instruction provided.
Claremont Showgrounds, 2016 Home of the Claremont FC

Pre-Primary - Yr 6's



FOOTY TEAM SPECIAL

1 Day Clinic

Monday 4th July

normally \$100.00

9.00am - 3.00pm

We are pleased to offer a special 'teams' discount for Claremont Tigers District Junior Teams & will ensure players from your team are grouped together!

Register 5 or more Players from the same team & receive \$15.00 off per participant (only \$85.00).

Registrations must be received on the application form supplied.



Morning Tea and Lunch Provided

Great Prizes to Win

MEET YOUR FOOTY HEROES!

HOLIDAY CLINIC PACK

All participants will receive a Claremont Tigers Training Pack including sports towel, water bottle, training bag & give-a-ways (value over \$50.00)

FOR MORE INFORMATION PHONE (08) 9384-9200

REGISTER INDIVIDUALS ONLINE at [WWW.CLAREMONTFC.COM.AU](http://www.claremontfc.com.au)

Claremont Tigers

FOOTY CLINICS 2015

TIGERS
DISTRICT
"Growing our Great Game"



DECLARATION: In registering my child, I as parent/guardian, in the event of an accident or illness suffered by my child, authorise the organisers to obtain, on my behalf, such medical assistance as my child may require. Organisers will not be liable for loss, damage or injury, to property or person, occasioned as a consequence of enrolment of any child or children in any Claremont Football Club, Claremont Football District or WA Football Commission Programs, and I acknowledge the exclusion of liability accordingly.

In addition I agree to the following:

1) I give permission for my child to be photographed whilst participating in this program and understand that images may be used for future program marketing material. 2) No refunds will be issued for non-attendance. 3) Any clothing size requests are not guaranteed and will be used as a guide only.

Team Name: _____ Yr Group: _____ Club: _____

Name of child	Emergency Contact Name	Emergency Contact Number
Email Address	Medical Conditions	Parent Initials (Agreeing to Declaration)

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Please note: if registering more than 5 players please attach duplicate registration forms. Only one payment form is required.

This application form is a teams registration form only and is only suitable when registering five or more players from the same team. Individual registrations should be complete online at www.tigersdistrict.com.au

DATE: _____ PAYMENT METHOD: CASH / CHEQUE / CREDIT

TOTAL \$: _____ (includes GST)

CARD No: _____ / _____ / _____ EXP DATE: _____ / _____

NAME ON CARD: _____ SIGNED: _____

FOR MORE INFORMATION PHONE 9384-9200 or EMAIL rhopkins@wafc.com.au
TEAM APPLICATIONS CLOSE 10AM TUESDAY 31st JUNE 2016 OR WHEN FULL