



# Mellieħa S.C. Football Nursery

Mellieħa Sports Complex

Vinçenzo Ciappara Street

Mellieħa MLH 1760

**SOCGER PLAY**

**LADRU ACADEMY**

## Summer Camp 2017 - Soccer Star Challenge

Applicant's Name & Surname: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Father's Name \_\_\_\_\_

Father's ID No.: \_\_\_\_\_

Mother's Name \_\_\_\_\_

Mother's ID No.: \_\_\_\_\_

Current Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Mobile Nos.: \_\_\_\_\_

Email: \_\_\_\_\_

Any known medical conditions: \_\_\_\_\_

I the undersigned, parent or legal guardian of the above applicant, do hereby request that my son/daughter be registered with the Mellieħa SC Football Nursery to participate in the Summer Camp 2017. I accept that the information given on behalf of our son/daughter may be used by the nursery, as well as given to third parties in connection with the work and direction of the Nursery for any legitimate purpose, in accordance with the Data Protection Act 2001. I also give my consent for any photographic material of my son/daughter to be used by the Mellieħa SC Football Nursery on its social media, website and Annual Magazine. Fee € 90.

Signature: \_\_\_\_\_

Parent/Legal Guardian

Date: \_\_\_\_\_

T. 21525845

W. [www.melliehascfn.org](http://www.melliehascfn.org)

FB. [www.facebook.com/melliehanursery](http://www.facebook.com/melliehanursery) W. [www.melliehascfn.org](http://www.melliehascfn.org)

E. [melliehascfootballnursery@gmail.com](mailto:melliehascfootballnursery@gmail.com)