

# ELITE



## SOCCKER SCHOOL OF COACHING

Proprietor & Head Coach: Martin Pattison

27 Stalybridge Close, Park Gate, Southampton SO31 7FY m: 07747750590 t: 01489 574073

Elite Soccer School of Coaching is keen to promote sport in the community and develop the talents of girls and boys 4 to 14 yrs, after school and during school holidays.

### **MULTI SPORT FUNWEEK (C1) Sports Hall & FOOTBALL FUNWEEK (F1) Playing Field**

**TWO SEPARATE COURSES RUNNING CONCURRENTLY AT  
CROFTON SCHOOL, STUBBINGTON**

**FEBRUARY HALF TERM SCHOOL HOLIDAY 2010**

**15<sup>th</sup> - 19<sup>th</sup> FEBRUARY incl**

**10am till 3pm**

**£50 for either of the 5 day courses**

Individual days £12 per day. Family discount available on request.

There may be the opportunity for the attendees to interchange between courses on a daily basis and any application in this regard will be assessed on it's merit during the course.

### **FOOTBALL FUNWEEK (F2) Playing Field**

**BROOKFIELD SCHOOL, SARISBURY GREEN**

**FEBRUARY HALF TERM SCHOOL HOLIDAY 2010**

**15<sup>th</sup> - 19<sup>th</sup> FEB incl**

**10am till 3pm**

**£50 for the 5 day course**

Individual days £12 per day. Family discount available on request.

LIMITED PLACES AVAILABLE SO COMPLETE AND RETURN FORM NOW TO AVOID  
DISAPOINTMENT! JOINING INSTRUCTIONS WILL BE DESPATCHED & SHOULD BE USED AS  
FORMAL CONFIRMATION OF INCLUSION ON THE RELATIVE COURSE

Please ensure your child wears a T-shirt or football shirt, shorts, socks, shin pads (for football) and suitable footwear. Bring a drink, lunch and suitable clothing in the event of cold or wet weather.

**Phone free: 08081 444 099 for more information.**

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**Registration For** Feb 2010 Funweek Appn **COURSE C1/ F1/ F2** delete as appropriate **Dates Attending:** \_\_\_\_\_  
**Surname:** \_\_\_\_\_ **Full Christian Names:** \_\_\_\_\_ **Age:** \_\_\_\_ **Date of Birth:** \_\_\_\_\_  
**Home Address:** \_\_\_\_\_

**Contact Telephone Numbers (with std codes) Home:** \_\_\_\_\_ **Work:** \_\_\_\_\_ **Emergency:** \_\_\_\_\_

**Brief Details of any Medical Ailment:** \_\_\_\_\_ **I Hereby Enclose £** \_\_\_\_\_

**I / We, do / do not, consent to the application of any medication in the event of injury whilst in your care. (delete where applicable)**

**I/ We, do / do not, consent to my child(ren) making their own way home.(delete where applicable)**

**I/ We, do/ do not, consent to photographs taken of my child(ren) (delete where applicable)**

**Cheques to be made payable to ESSOC and posted to: 27 Stalybridge Close, Park Gate, Southampton, SO31 7FY**

**I acknowledge that Elite Soccer School of Coaching, its agents, servants and employees are not liable for personal injury, loss or damage to personal property whilst attending the course.**

**Signed:** \_\_\_\_\_ **Parent / Guardian** **Date:** \_\_\_\_\_