

Book online at

**WWW.PLAYTHEARSENALWAY.COM**

or complete and return the form below

**OR ALTERNATIVELY**

Please complete and return with payment to:  
**Players Soccer Schools, PO Box 3424**  
**Swindon, Wiltshire SN2 9FA**

Name: \_\_\_\_\_

Name of parent/guardian: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

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

Age: \_\_\_\_\_ Dob: \_\_\_\_\_ M/F: \_\_\_\_\_

Contact Number (s) \_\_\_\_\_

\_\_\_\_\_

Are you an Arsenal fan? Yes  No

Any health problems or disabilities:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Course Venue: \_\_\_\_\_

Dates: \_\_\_\_\_

Money enclosed: \_\_\_\_\_

How did you find out about Arsenal Soccer Schools? \_\_\_\_\_

Cheques should be made payable to: **Players Soccer Schools**

**PARENTAL CONSENT**

Please tick if you have objections to images taken at Soccer School events being used by both the Soccer School partner and Arsenal internal Club media and promotional material.  Please tick if you do not wish to receive information and promotional offers from Arsenal Football Club. By returning this form you will be indicating your consent to receiving such promotional messages unless you have ticked the box above to indicate an objection.

I authorise coaching staff to administer or approve any medical treatment deemed necessary. I agree that the Soccer School reserves the right to remove any disruptive children from the course and that the Soccer School do not accept responsibility for loss or damage whether to person or property in connection with these courses.

Please read our Terms and Conditions of Booking which can be found at the following link: [www.playthearsenalway.com/bookings](http://www.playthearsenalway.com/bookings)  
By signing this form you are confirming that you have read the Terms and Conditions and that you are consenting to them.

Signed \_\_\_\_\_ Parent/Carer Date \_\_\_\_\_