

We are pleased to announce that Chelsea FC have been invited back to our second extravaganza. The first was a huge success and the feedback from both players and parents was extremely positive in addition to raising much needed funds for your club.

This course is a fun coaching day run by qualified Chelsea FC coaching staff. Chris Harris a head coach with the premier league club, will bring a team of coaches along to run the event. Please ensure all players bring along the following:

- ▶▶ Packed Lunch & Plenty of Non-Fizzy Drinks
- ▶▶ Hats & Sun Cream

The day will consist of skills stations in the morning and tournaments incorporating presentation in the afternoon. Please support our club by enrolling on the Chelsea FC Coaching Day.

If you would like to attend please complete the form below and return with payment (cheques made payable to Sedlescombe Rangers Junior FC) to your manager no later than 4 August.

2 Day Extravaganza @ Sedlsecombe Rangers JFC

Name: _____ Age: _____ D.O.B.: ____/____/____

Address: _____

_____ Postcode: _____

Tel No: _____ Emerg No: _____

Medical Conditions: _____

Contact Name: _____ Email: _____

Manager Name: _____

I enclose a cheque made payable to Sedlescombe Rangers JFC for £ _____

Chelsea FC is committed through trained and competent staff to providing a safe learning environment, however football is a contact sport and injuries may occur through no negligence of our staff. We believe it is our responsibility to ask you to ensure the safety of the attendee by ensuring they bring the correct equipment for the course as stated in this document. Please ensure that players have any medication they may require as stated above.

Parent/Guardian Declaration: *I have read and understood this form, completed all details to the best of my knowledge and will ensure that I comply with the information set out. I acknowledge and accept that CFC or respective servants shall not have any liability in respect of any loss or damage to property whilst in attendance on a CFC course. I hereby give permission for my child/ren to be given emergency medical treatment in my absence if deemed appropriate.*

I DO/DO NOT GIVE PERMISSION (PLEASE DELETE AS NECESSARY) FOR ANY PHOTOGRAPHS/VIDEO FOOTAGE TAKEN OF MY CHILD/REN DURING A CFC COURSE TO BE USED IN PROMOTIONAL/MARKETING MATERIAL.

Signature of Parent/Guardian: _____ Date: _____