



DELHI UNITED FOOTBALL CLUB

Affiliated to : Delhi Soccer Association
www.delhiunitedfc.com

ACADEMY REGISTRATION FORM

APPLICANT'S DETAILS

Name: _____

Gender: Male () Female ()

Date of Birth: [][] [][] [][][][]

Age: _____

Height: _____

Weight (in kg.): _____

Name of School: _____ Class: _____

Mobile No.: [][][][][][][][][][]

E-mail ID: _____

Medical History: No [] Yes [] If Yes, please specify

Jersey Size: S [] M [] L [] XL [] Program: 3Mths/6Mths/9Mths

Position: Forward [] Goalkeeper [] Midfielder [] Defender [] Beginner []

PARENT'S DETAILS

Father's Name: _____ Mother's Name: _____

Mobile No.: [][][][][][][][][][] Email ID: _____

Address: _____

EMERGENCY CONTACT DETAILS

Name: _____ Mobile No.: [][][][][][][][][][]

Terms & Conditions

1. I _____ (Parent / Guardian / Player) do hereby undertake to abide by the rules of the DUFC Academy. The Academy shall not be held responsible for any injury during play at the training.
2. I declare my ward is not suffering from any health problems which might hinder the training.
3. I accept that DUFC Academy will get the age proof Certificate to prevent age cheating in Indian Sport. Therefore, I shall not at any stage manipulate the age of my ward. Any act of this kind shall invite immediate disqualification from the DUFC Academy.
4. DUFC Academy shall have right to 1st refusal, whenever playing any age group/club matches. If there is a clash between representing School/colleges, my ward shall always play for DUFC Academy.
5. We shall seek permission from the academy before going for any Trails or Tournaments outside from Academy.
6. No refund can be given for cancellation received for coaching program fee, less than 2 weeks prior to the date of the starting of relevant coaching program.
7. All coaching programs, activities, venues and other arrangements are subject to change according to weather, venue availability, a satisfactory level of applicants or other factors beyond our control. As such, we may cancel or change any coaching program, should this be necessary for these reasons
8. No refund is permitted for applicant's failure to attend the coaching program.
9. We do not accept responsibility for any LOSS, personal injury or damage to property other than to the extent that it results from our wilful misconduct. You are responsible for arranging and paying for travel to coaching program venue and vice versa.
10. The cost of any damage caused by you or any applicant you have booked on the coaching program to any property or facilities will be passed on to you.

Date: _____ Signature of Parent/Guardian: _____

CONSENT

I give my full consent for my child, _____, to participate in Delhi United Football Academy. I confirm that I have notified Academy of any medical difficulties that could affect my child's ability to participate fully in these activities. I understand that some activities may be strenuous and that a reasonable standard of fitness for them is essential. I assume full responsibility for any claims, losses, costs, articles or liabilities arising out of or related to my child's participation in the camp. In cases of medical emergency, I hereby delegate Academy staff the power to authorize and obtain any necessary diagnosis and treatment for my child and I will bear all costs of the same.

I accept that Academy activities carry with them some degree of risk both to person and property and knowing this risk, I still desire my child to participate in the camp program, unless I have specified otherwise in writing. In the unlikely event of an accident, I release, waive and hold harmless Academy, coaches, technical staff and directors, other co-partner from any claims, losses, damages or expenses which may arise during the camp programme. I also agree with the rules and code of conduct for players, parents and co-ordinator.

I, _____, the parent/guardian of _____
have read and approve the above and agree to all terms and conditions.

Signature of Parent / Guardian _____ Date _____

Name of Parent/Guardian _____

PAYMENT DETAILS:

DUFA Kit Fee: 1000/- (Mandatory)

Coaching Fee: 7,500 for 3 Months/ 13,500 for 6 Months/18,000 for 9 Months(Any One of Three)

Transport Facility Charges: 1000/- per month(Optional)

Cheque/ DD/ Pay Order No: _____ Date: _____ Amount: _____

Name of Bank: _____ Branch: _____

Please note that registrations are subject to realization of payments.

INSTRUCTIONS FOR COMPLETING THE REGISTRATION

1. Please fill the form in Block Letters.
2. Registration form should be signed by parents only.
3. The printed and signed form including medical and consent form, along with the Cheque/ DD/Pay Order of requisite amount drawn in favour of **“United Soccer Pvt. Ltd.”** payable at New Delhi has to be deposited.
4. One copy of the applicant's proof of birth and 2 photographs must accompany this form.
5. Receipt will be issued, upon request.



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Received Rs _____ in Cash/Cheque No _____ Dated _____

Bank _____ towards **Fee** for availing football coaching for duration
_____ to _____

Date _____

Signature _____

Registration No. _____

Email: info@delhiunitedfc.com