

# CHARLIE BOSWELL'S Football Club

After School Club

Information for parents/guardians

The Bernards Heath Junior School After school Football Club will commence on Wednesday 26<sup>th</sup> April 2017 and will conclude on Wednesday 19<sup>th</sup> July 2017

Location: **Bernards Heath Junior School**  
Available to: **Boys and Girls (Years 3 – 6)**  
Day: **Wednesday**  
Time: **3:30pm – 4:30pm**  
Cost: **£60 (12 sessions £5 per session)**

**What the session involve:** A fun and inclusive session for all those involved, session contents will be FUNdamental warm-ups, Technical based work, Small sided duals 2vs2 3vs3, small sided games and themed tournaments. The young people will be given the freedom to be creative with skills, organising, and leading their own games.

**Parents/guardians should note the following information and sign the form below:**

- All participants are expected to wear appropriate clothing, boots and shin pads.
- You agree for your child to participate in the knowledge that this is a contact sport and an injury is always possible.
- Sessions are usually outdoors on the school fields, in bad light or bad weather we will use the playground or the hall.
- School will notify parents if session is cancelled.
- This is a fully inclusive club so there are a small number of hardship places available by personal application to the head teacher.
- In partnership with St Albans City Youth Apprentice Scheme
- All money to be paid by the second week.

***All coaches are FA qualified, Safeguarded, First aid trained and CRB checked.***

Charlie Boswell's Afterschool football club

Full Name: ..... DOB ..... Age .....

Address:.....

..... Post Code: .....

Parents Name:..... Phone Number:.....

Email Address:..... Medical conditions.....

Does your child have any learning difficulties which might impact on their ability to participate? If so please explain:.....

How will your child be travelling home: Independently walking or collected? (please circle one)

I agree to allow my child to participate in the Soccer Club. I certify that my child is in excellent physical health, may participate in physical sporting activities as part of the camp. I hereby release and discharge Charlie Boswell & coaches from all claims, demands and/or loss suffered by my child as a result of his/her participation on the club.

Signed ..... Date ..... **Please make**

**Cheques payable to Charlie Boswell**

Charlie Boswell: 07731 837913 Email: [Charlie.boswell@cityyouthfc.com](mailto:Charlie.boswell@cityyouthfc.com)