



**SYDNEY UNITED FC
TRIAL REGISTRATION FORM – SEASON 2012
PREMIER YOUTH LEAGUE**

Please print clearly

Age Group Trialing For _____

Player # _____ Bib colour _____ Bib number _____ (office use)

Name: _____

Date of Birth: _____

Position Played (last season): _____

Previous Club (last season): _____

Home Address: _____

_____ State: _____ P/code: _____

Telephone: _____ (h) _____ (m)

Email Adress: _____

Please read the following carefully and should you choose to register to trial with Sydney United Football Club, sign and date below:

Please be advised that should your child be selected for one of the Premier Youth League teams, the fees will be \$2,500 per season for grade 13 to grade 18. A 50% deposit is payable at time of signing a FNSW registration form and balance to be paid on or before the 1st of February 2012. Attached is a brief explanation of training schedule and game time policy.

Does the player suffer from Asthma: _____

Please state below if there is any other Medical condition the player may have of which we should be made aware of and which would prohibit him from partaking in physical training: _____

Name Parent/Guardian

Signature Parent/Guardian

Date

