



**Georgia Futbol Club
Premier Training 2008 Application - Select and Rec Off Season
Program**

.....REGISTRATION.....

PLAYER _____ AGE _____

School _____

PARENTS NAMES _____

EMAIL _____ CELL _____

ADDRESS _____

PHONE [H] _____ PHONE [W] _____

Health Concerns _____

As parent/guardian of the above player(s), I agree to hold harmless Georgia FC, staff members, and Gwinnett Parks & Recreation for injuries and other Incidents that may result in my child's participation in the above activity. Further, I have current medical insurance coverage, agreeing to assume all responsibilities if such expenses arise from injuries sustained in the activity.

Signature _____ Date _____

GFC Premier Training 2008

Check # _____

Received _____

Date _____

**Mail application and fee, payable to
Georgia FC
Premier Training
P.O Box 1413 Snellville, GA 30078**

Deadline for signup is *December 6th*.