



Champions Soccer Academy Dubai – Registration & Consent Form

To register with us, please fill the form and leave it with our coaches:

Player Name	
Date of Birth / Age	
Parent/Legal Guardian Name	
Parent/Legal Guardian Phone Number	
Parent/Legal Guardian Email Address	
Training Day, Location and Time	

Release from Liability — I, the parent or legal guardian of the player (child) mentioned above requesting that Champions Soccer Academy Dubai (the Academy) permit my child to participate in the academy's soccer programmes, practices, competitions and all other sponsored activities (collectively 'soccer activities'). By signing the below, I agree to abide by the rules of the Academy and its affiliated organisations or sponsored activities*. Recognizing the possibility of physical injury associated with soccer and in consideration for the Academy accepting my child for its activities, I hereby release, discharge and/or otherwise indemnify the Academy, its affiliated organizations and their employees, including the owners of the fields and facilities utilized for the programmes, against any claim by or on behalf of my child as the result of his/her participation in the soccer activities.

Parent/Legal Guardian Signature: _____

Date: _____

*Further information and FAQ can be found at our website – www.championsocceracademy.com

Thank you for registering with us!

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