



# CAFC FOOTBALL ACADEMY

in association with Glenthorne High School



## APPLICATION FORM

This application is to enrol as a student in the CAFC Football Academy participating in academic and sports programs at Glenthorne High School. The spaces in the academy are strictly limited and therefore places cannot either be reserved or guaranteed.

All parts of this form must be properly completed. Please read the Academy information leaflet thoroughly prior to trying to complete this application.

### Applicant's details:

First name: \_\_\_\_\_ Surname: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Post code: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_

Current school: \_\_\_\_\_ Current school year group: \_\_\_\_\_

Name of head of year at school: \_\_\_\_\_ Telephone number: \_\_\_\_\_

### Applicant's Parent/Guardian details:

Relationship with applicant: \_\_\_\_\_

First name: \_\_\_\_\_ Surname: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Post code: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_

### Applicant's Football status (all details essential)

Team/club currently playing for: \_\_\_\_\_ Preferred position: \_\_\_\_\_

League and division of above team: \_\_\_\_\_ Number of years at this team: \_\_\_\_\_

Team type:  Sunday team  School team  Other (explain) \_\_\_\_\_  
*Please tick*

Manager's name: \_\_\_\_\_ Manager's tel: \_\_\_\_\_

Please detail all other relevant football experiences including trials or playing for district teams, academies, county or league representative teams

Description (eg Chelsea academy trial)	Year (eg 2007)

