



ENROL ONLINE AT [ROARACTIVE.COM.AU](http://ROARACTIVE.COM.AU)

or return completed forms to:

E: [rap@brisbaneroar.com.au](mailto:rap@brisbaneroar.com.au)

P: Brisbane Roar FC, Locked Bag 253

Browns Plains BC QLD 4118

PLEASE DON'T LEAVE ANY FORMS IN THE SCHOOL OFFICE

## THE ROAR ACTIVE PROGRAM:



Venue:

Dates:

Times:

Age or Grade:

Cost:

We offer highly skilled coaches and a structured program that caters to a variety of age groups and skill levels. Get in early to avoid missing out as numbers are limited.



For enquiries please contact:

P:

E:

## REGISTRATION FOR:

### Your child's details:

Full name:

Date of birth:

Age:

School Grade:

Home phone:

Mobile:

Email:

Address:

Postcode:

Medical Conditions:

### Emergency contact details:

Name:

Number:

## PAYMENT DETAILS:

### Credit card:

☐

Mastercard

☐

Visa

Card number:

Expiry date:

CCV:

### Cheque/money order:

Please make payable to Roar Recreation and Welfare Limited and attach to this registration form.

Cheque No:

Amount:

### Parent/guardian disclaimer:

I certify that my child enrolled here on is in excellent health and may participate in strenuous physical activities including soccer. I agree to defend and hold Brisbane Roar FC, its servants, agents and/or employees and contractors harmless from any and all claims for injuries that may be sustained by my child during his or her participation in the camp. Permission is hereby granted to Brisbane Roar FC to use pictures of the participants in any promotional materials. Permission is granted for my child to receive emergency medical treatment, if needed, and I certify that there are no limits to my child's participation except as stated in writing and included with this application.

### Acceptance:

Parent/guardian name:

Signature:

Date:

Roar Recreation & Welfare Limited are a non-for-profit organisation delivering football clinics for Brisbane Roar Football Club. All monies go back in to local community football development and the Roar Active Program.