

أكاديمية نادي عجمان الخاصة AJMAN CLUB PRIVATE ACADEMY

Ajman Club Private Academy, Rashidiya 2, Ajman
Tel: +971 52 944 5533 Email: info@ajmanc.ae

Player Registration Form

Kindly fill all the player details below:

Issue Date: _____

Name of Player: _____
Date of Birth & Age: _____
School: _____
Nationality: _____
Kit Size (S/M/L/XL/XXL) _____
Place of Birth: _____
Address: _____
Contact #: _____
Emergency Contact #: _____
Email address: _____

How did you hear about us?

Parents Acknowledgment

I _____ the parent of the player _____ agree my son to join Ajman Youth Academy and I'm obliged to pay all the required monthly fees for the specified season. I hold responsibility of informing the academy about any underlining health condition (if occur) of my son during the joining date in order for the Academy to take into consideration the training season and other players safety.

Players Acknowledgment

I _____ agree to join Ajman Youth Academy from Season _____ and I acknowledge to respect the coach, team members, opponents, staff members, administration office and all those related to the football academy and to preserve the indoor and outdoor facilities and equipment of the property.

Does the player have any chronic disease, allergy or any pre existing physical injuries? ✓

No

Yes (please specify) _____

**Signature of
parent/guardian of the player**

**Signature/Stamp of
Administrative Officer**

Important Documents Required for Registration:

1. Colored copy of players & parents Emirates ID
2. A clear and updated photo of the player
3. Attested medical report of the player (Recent Covid Test)