

ZAYED CRICKET ACADEMY



Registration Form – Season 2017

IMPORTANT: Please write in **BLOCK LETTERS**

Full Name of the Participant: _____

Place & Date of Birth: _____

Name of School: _____

Blood Type: _____

Allergic to Anything: _____

(Please Elaborate)

Nationality/UAE: _____

(Resident)

Father/Mother Name: _____

E. Mail Address: _____

Contact No's: 1) _____ **2)** _____

I hereby undertake:

- That I and my kith and kin shall not hold ABU DHABI CRICKET CLUB for any and all responsibility in case of injuries/fatal injury or any form of loss before, during and after play on or off the ABU DHABI CRICKET CLUB & COUNCIL net/grounds, as my wards participation is entirely on my own risk and cost.
- That there will be no make-up classes for trainees absent for the coaching lessons, please ensure that the Coaches fees paid in advance, before the start of next month

Name:

Parent's Signature:

OFFICE USE ONLY:

Registration No.:

Date:

Receipt No:

Telephone No: + 971 2 5588331

Fax: + 971 5588339

Website: www.adcricketclub.ae

E-mail: info@adcricketclub.ae or vijay@adcricketclub.ae