



Girls Centre of Excellence
2009/2010

Leeds United Girls Centre of Excellence are launching a Girls Development Centre for girls **aged 7 to 10 (School year 3, 4 and 5)**

The Development Centre represents a fantastic opportunity to experience all the fun and enjoyment that girls football offers, whilst at the same time working on the fundamental basic skills and techniques delivered by our experienced FITC coaching team. The six week programme uses a variety of exciting activities in such a way that it "fits" the child and not the other way round.

If you would like to take up this invitation, please either contact us on 0113 367 6307 or complete the attached application form and return it to the address shown as soon as possible to guarantee your child's place. However, if she is currently signed by another FA Girls Centre of Excellence, please ignore this correspondence

VENUE	COURSE REF	DAY	START/FINISH DATE	TIMES
Ossett Albion, Dimple Wells Lane, Ossett, WF5 8RN	GDC2b	Thursday (evenings)	6 th May 2010 – 27 th May 2010	6.00-7.00pm
PLAYING SURFACE				
3G				

This block runs for 4 consecutive weeks from the start dates shown.
You will receive confirmation by post once your application has been approved and processed.

It is understood that it is the parent/guardian's responsibility to inform *Football in the Community* of any medical condition that could affect a child's participation in any activity. Please give further details if appropriate.

PLEASE NOTE: THIS COURSE IS SOLD AS 4 x WEEK PACKAGES ONLY



Girls Development Centre 2009/10

APPLICATION FORM (Block 2b)

Full Name of Child: _____

Date of Birth: ____ / ____ / ____ Age: ____ Age Group: Under ____'s

Address: _____

Telephone Number(s) : _____ / _____

E-Mail Address : _____

GDC2b/FEE: £12.00 for x 4 weeks

PAYMENT DETAILS:

Credit/Debit Card * Please tick: Mastercard Switch/Maestro/Solo Visa

Card No:

Exp Date: ____ / ____ Issue No: (Switch/Maestro/Solo) ____ Cardholder's Name (please print): _____

Valid From: (Switch/Maestro/Solo) ____ / ____ Cardholder's Signature: _____ Date: ____ / ____ / ____

Cardholder's Name (please print): _____ Cardholder's Signature: _____ Date: ____ / ____ / ____

* Please note there is a charge of £1.00 for using a credit/debit card

I enclose a cheque / postal order made payable to *Leeds United Football in the Community*

Signed (Parent/Guardian) : _____ Date : ____ / ____ / ____

PLACES ARE LIMITED, PLEASE RETURN THIS FORM AS SOON AS POSSIBLE TO :

**Leeds United Football in the Community Application, Leeds United, Elland Road, LEEDS, LS11 0ES
Or book your place now on 0113 367 6307**