**Student Information:**

Surname: First Name:

Sex: Male Female

Address:

Date of Birth:

Are you a registered member of a community football club? Yes No

If yes, please write the name of your community club below:

**Parent/Guardian/Carer Information:**

Surname: First Name:

Address (leave blank is same as above):

Parent E-mail:

Best Contact Number:

**Applications close 2 August 2019. Late applications may not be considered.**

**Football Information:**

Students to complete:

1. Why do you wish to participate in the Football Program?

2. Describe yourself as a footballer? What are your strengths and weaknesses?

*Completed forms are to be returned to Mr Jake Davis via email* [*Jake.Davis2@education.wa.edu.au*](mailto:Jake.Davis2@education.wa.edu.au) *or via the Front Office by the 2 August 2019. Further information can be obtained by calling 9573 0200.*