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**TORQUAY ACADEMY**

**Application Form - Football Academy**

**Trial Date: Saturday 6th October 2018**

**9.00am – 12.00pm**

**Student Details**

|  |  |  |  |
| --- | --- | --- | --- |
| First Name |  | Surname |  |
| Date of Birth |  | Gender |  |
| Address  |  |
| Town  |  |
| County |  | Post Code |  |
| Parent Contact Name |  |
| Home Tel. |  | Mobile Tel. |  |
| Email |  |
| Current School |  |
| Current Football Team(s) |  |
| Representative or Academy/Professional Team & Length of Time with that Team |  |

**Parent Signature:**

|  |  |
| --- | --- |
| Signed (e-signature also accepted) |  |
| Print Name |  |
| Date |  |

Please return completed application forms by 21st September 2018 to: admin@tqacademy.co.uk or send direct to:

Torquay Academy

Cricketfield Road

Torquay

TQ2 7NU