



REGISTRATION FORM PRIMARY

INFORMATION

Last name		Home address	
Zip Code		City	

PARTICIPANTS

	First name	Class	Clothing size	Departure	Remarks
1					
2					
3					
4					

Selected sports activities / manual activities / school tutoring

Ex : for Handball Thursday 16h30 --> Hand Thu 16h30

1						
2						
3						
4						

EMERGENCY CONTACTS

	First name	Last name	Telephone	Email
Father				
Mother				

PUBLIC LIABILITY INSURANCE

Name of the company		Insurance number	
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AUTHORIZATIONS AND CERTIFICATIONS

I certify that there are no contraindications for my child to partake in sport activities and that my child is covered by medical insurance in case of injury.

I certify that I will pay the registration fees to: Rabobank NL09 RABO 0115654739, SAMEDIS MALINS

I authorize the Club Samedis Malins to take photos/videos in which our children may appear and to publish them on the website, newsletter, Facebook, and Instagram.

PRICES OF SELECTED ACTIVITIES

Activities	Number	Price	Total
Sports activities			
Manual activities or games			
School tutoring			
Multisports on Wednesday (3 hours)			
Manual activities on Wednesday (3 hours)			
Evenings / weekends 1st activity (per person)			
Evenings / weekends 2nd activity (per person)			
Evenings / weekends 3rd activity (per person)			
Evenings / weekends 4th activity (per person)			
		FREE	
TOTAL AMOUNT DUE			

SIGNATURE, I, the undersigned, father, mother, certify that I have read and agreed to the above terms.

Name:	Place:	Date:	Signature:
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