



Registration form - 2016-2017

Please ensure your annual subscription is paid by bank transfer with your child's First name + surname to our bank account by 31 October.

Child/Children	
First name (BLOCK LETTERS)	
Surname (BLOCK LETTERS)	
Date of Birth / Age	

First name (BLOCK LETTERS)	
Surname (BLOCK LETTERS)	
Date of Birth / Age	
First name (BLOCK LETTERS)	
Surname (BLOCK LETTERS)	
Date of Birth / Age	

Parents	
First name (BLOCK LETTERS)	
Surname (BLOCK LETTERS)	
Email address	
Landline	
Mobile	

I agree for pictures of my child to be occasionally posted on the website www.playgaa.be	Signature
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I have subscribed an insurance for my child/children listed above	Signature
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Membership	Transfer to bank ING BANK - 310-1619615-92
Individual child: € 50	Yes No
Family (more than 1 child): € 90	Yes No