



Stars Football Academy  
The College of The Holy Child, Magdalen  
Road, Hastings, East Sussex TN37 6EG  
Office Number: 0044 (0) 1424 427 540  
WhatsApp: 0044 7903 032 534  
Email: info@starsfootball.co.uk

## Stars Football Summer Training Camp 2019

With Special Guest

**Tony Adams**

Arsenal & England

**This application form has been issued to you because you have expressed interest in the Stars Football Summer Training Camp 2019. Please complete the attached documents and return to [dw@starsfootball.co.uk](mailto:dw@starsfootball.co.uk)**

Application Checklist:	Tick
1. Completed and signed application form below	
2. Course fee payment	
3. Copies of Passport(s), Visa(s) & Police Registration (if applicable)	
4. References if requested	
5. Medical Consent Form	
6. Student Media Release Consent Form	
7. Transport Plan	

SUCCEED  
STARSFOOTBALL.CO.UK



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## STUDENT DETAILS

First Name:		Surname:			
Date of Birth:		Place of Birth:			
Nationality:		First Language:			
Mobile Number:		Email:			
Address:					
Gender (please circle):		Male    Female    Other			
English Name:		Nickname:			
Passport Number:		Expires On:	UK Visa Held?	Yes    No	
My child requires residential accommodation during their stay		Yes    No			
Shirt Size (please circle)		Small    Medium    Large			



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**PARENT DETAILS**

Parent/Guardian 1	Relationship to student:	
Name:	Email:	
Phone number:	Mobile number:	
Address:		

Parent/Guardian 2	Relationship to student:	
Name:	Email:	

Phone number:	Mobile number:
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Address (if different):
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Does the child live with both parents?
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If 'no' with which parent does the child normally reside and does this parent have legal custody?
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## Stars Football Summer Training Camp 2019

### Medical Consent Form

<b>Student Name</b>		<b>D.O.B.</b>	
<b>Course</b>		<b>Nationality</b>	
<b>Home Address</b>			
<b>Name of Next of Kin</b>		<b>Relationship to student</b>	
<b>NoK Contact Number (s)</b>		<b>NoK Address</b>	
<b>Details of UK Doctor if registered</b>	<small>College staff will register your child with the College GP if not registered already</small>		
<b>Known Allergies and Medical Conditions (including noteworthy previous conditions)</b>	<small>Please note any dietary requirement here, also.</small>		
<b>Current Medications and Dosages</b>			
<b>Any other conditions or prohibited medications</b>			
<b>I hereby give consent for nominated staff at The College of The Holy Child to act in Loco Parentis regarding my child's medical care provision, with particular regard to the provision of medical care, first aid and emergency medical treatment as detailed in the Administration of Medication &amp; First Aid Policies available online.</b>			
<b>Signed</b> <small>(if student is under 18)</small>		<b>Print Name</b>	
<b>Date</b>		<b>Relationship to student</b>	

Please hand this form into the Welfare Office on arrival or email to:  
 DSL@STARSFOOTBALL.CO.UK

Program provided by Stars Football Ltd a company registered  
 in England & Wales number 10757767 in association with The College of the Holy Child



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## Student Media Release Consent Form

I hereby give consent for Stars Football Ltd and and/or partners to record, film, photograph, audiotape or videotape my child’s name, image, athletic pursuits, student work, and performance (hereinafter collectively referred to as “Works”) and to display, publish or distribute these Works for the purpose of publishing, posting on the Stars Football website, posting in schools, posting on social media sites (including but not limited to: Facebook; Twitter; Instagram; YouTube) and/or for broadcasting on television or radio as determined by Stars Football.

I hereby waive any right to approve the use of these Works now or in the future, whether the use is known to me or unknown, and I waive any right to any royalties related to the use of these Works.

I understand that the Works may appear in electronic form on the internet or in other publications outside of Stars Football’s control. I agree that I will not hold Stars Football responsible for any harm that may arise from such unauthorized reproduction.

I also understand that external media organisations may attend school events. I give permission for my child’s name, image, athletic pursuits, student work, and performance to be photographed, filmed, audio-taped or videotaped for the purpose of being published and/or broadcast on-line, on television or radio.

I have read this Student Media Release Consent Form and I fully understand the contents and meaning of this release. I understand that in authorizing the release of such information, I am releasing any claim to the protection of personal privacy of my child which I am entitled.

Signature of Parent/Guardian		Date	
Signature of Student (also required)		Date	



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**PAYMENT DETAILS AND PARENTAL AGREEMENT**

I agree to pay the course deposit of **£600.00** in full within 7 days of this form's submission to secure my child's place. The remaining payment must be made in full before you child's arrival at the Camp.

Parent's agreement:  
 I agree to the Terms and Conditions and Policies as published on the Stars Football website [www.starsfootball.co.uk](http://www.starsfootball.co.uk) and give consent for my child/ward to attend Stars Football for the aforementioned course.

Parent/Guardian 1 signature:	Dated:
Parent/Guardian 2 signature:	Dated:

**EMERGENCY CONTACTS – in emergencies, Stars Football staff should contact:**

Name:	Country Code:	Number:
Name:	Country Code:	Number:



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## Transport Plan

The Stars Football Summer Training Camp 2019 is held at their beautiful 12-acre campus. With unique facilities and outstanding academic provision, the College boasts excellent boarding accommodation in safe and secure surroundings.

The College is served by two mainline train stations:

Hastings – 1 mile away

St Leonard's Warrior Square – 300m away

Players from overseas can fly into London Gatwick or London Heathrow and travel to the College with ease:

London Gatwick – 90 minutes

London Heathrow – 120 minutes

Eurostar (Ashford International) – 30 minutes

Please complete the transport plan below and many any transfer requests here. The cost of all transfers must be borne by the applicant, but the College aims to reduce all costs by sharing transfers where possible. Please indicate your preference below.

Arrival Date at the Camp		Flight/Train Arrival Time at Destination	
Method of Travel		Arrival Airport/Train Station	
Flight Number/Train Arrival Time		Transfer Required	Yes / No
If <b>DO NOT</b> wish my child to share transfers with other players	<input type="checkbox"/>	Please tick if applicable	
My child will travel to the camp by private car	Yes / No	Arrival time for private car	
Departure Date from the Camp		Flight/Train Departure Time	
Method of Travel		Departure Airport/Train Station	
Flight Number/Train Departure Time		Departure Airport/Train Station	
My child will leave the camp by private car		Departure time for private car	