

Christmas Holiday Football Fun

CHAMPIONS LEAGUE TOURNAMENT DAY
 IN ASSOCIATION WITH PLYMOUTH ARGYLE YOUTH DEVELOPMENT



CHAMPIONS LEAGUE COMPETITION *
PLAYER OF THE DAY AWARD
***TROPHIES/MEDALS FOR WINNING TEAMS ***



ALL THE STAFF AND PLAYERS AT
 STOKE GABRIEL FOOTBALL & COMMUNITY CLUB
 WOULD LIKE TO WISH PLAYERS & THEIR FAMILIES
 A VERY HAPPY CHRISTMAS!

COMPLIMENTARY

GIFT

**CRB REGISTERED
 & UEFA
 QUALIFIED
 COACHES**



PROGRAMME
 9.45-10.00 Registration
 10.00-11.00 Warm up & coaching sessions
 11.00-11.10 Break
 11.10-12.15 Champs League Tournament
 12.15-12.45 Lunch
 12.45-2.30 Champs League Tournament
 2.30-3.00 Presentation and xmas draw

STOKE GABRIEL COMMUNITY SPORTS
www.stokegabrielafc.co.uk
info@shearsoccer.co.uk

Players will need to bring
 full playing kit, boots &
 trainers, shinpads, **warm
 clothing**, waterproofs,
 packed lunch and a drink.

STOKE GABRIEL FOOTBALL CLUB 10.00AM - 3.00PM TUESDAY DECEMBER 21st
(Presentation of awards and Christmas Prize Draw at 2.30pm. Families welcome)
BOYS & GIRLS Age 6-13 FEE:£ 12.50 *

(* Players that are registered with Stoke Gabriel youth teams will receive £2.50 reduction ie £10 fee)
ALL PLAYERS WILL BE ENTERED INTO PRIZE DRAW TO WIN SOME GREAT PRIZES
 FOR FURTHER DETAILS CONTACT ADAM SHEARER ON 07967 124844 or info@shearsoccer.co.uk PLEASE RETURN SLIP BELOW WITH
 REMITTANCE TO ADAM SHEARER, Halcyon Barn, Lembury Road, Stoke Gabriel, Totnes, TQ9 6QD. (CHEQUES MADE PAYABLE TO 'SGFC')
 Early booking is advisable as places are limited. Players will only be notified if they are NOT accepted on the course

*******SPECIAL OFFER*******

**BOOK ON TO BOTH COURSES (SHEAR SOCCER & STOKE GABRIEL) DEC 20TH & 21ST FOR £20
 PTO IF YOU BOOK ON TO BOTH COURSES , SEND 2 CHEQUES, (SHEAR SOCCER £10 & SGFC£10) PTO**

I consent to my son/daughter taking part in the Stoke Gabriel FC course at Stoke Gabriel Football Club
 I understand that Stoke Gabriel FC and the FA coaches will not be liable for any loss, injury or damage suffered to the participant. I understand that I am
 responsible for transporting my child to and from the venue. (We must receive written confirmation for players who walk home from course)
 Address:.....
 Telephone No: Emergency Contact No:
 E mail (if you would like to be sent further information on future courses)
 School Attended:..... D.O.B. Age.....
 Does your child have any allergies or suffer from any other medical condition?
 Will medication be required during the course? If Yes please state

I agree to my child having his/her photo taken for website/newspaper etc. YES/NO Signed Parent/Guardian

