

## Personal Information:

PASSPORT PHOTO

Full Name:

Date of Birth:

Passport Number ( If Any ) :

Gender:

Nationality:

Address:

City and State:

Email Address:

Phone Number:

State of Origin :

Local Government Area:

Religion :

Current Club (if applicable):

Previous Clubs (if any):

Position(s) Played:

Preferred Position:

Years of Playing Experience:

Level of Play (Amateur/Semi-Professional/Professional):

Any Relevant Achievements or Awards:

Height (Ft):

Weight (Kg):

Foot Dominance (Right/Left):

**Any Medical Conditions or Injuries (please specify):**

Additional Information:

**Briefly explain why you want to for our program and what you hope to achieve:**

**Consent and Declaration:**

I hereby declare that the information provided above is accurate and complete to the best of my knowledge. I understand that participating in the program does not guarantee a selection or any form of contract . I also understand that the organisers of the program and its representatives are not liable for any injuries sustained during the program.

**Signature: [Your Full Name] :**

**Date:**

**Submission Instructions:**

Please complete this registration form and submit it online , via email to [ureachsportsint@gmail.com], or in person at any of our drop off locations before the deadline. Make sure to bring appropriate football attire, footwear, and any necessary equipment to the trial sessions.

