



WISE UNITED FOOTBALL CLUB

Academy and Competitive Program Open Training Registration Form

Player's Name:

First Name

Last Name

Player's DOB:

Player's Gender: Male Female

Player's Address:

Address

City

State

Zip

Seasons Played:

Experience:

**Parent
Information:**

Father's First Name

Father's Last Name

Email

Phone Number

Mother's First Name

Mother's Last Name

Email

Phone Number

Wise United FC

Club Use Only:

Training Date:

Training Num.