



Professional Opportunities Course REGISTRATION FORM

Name: _____

Address: _____

Phone: _____ Email: _____

Shirt size: _____ Short size: _____

Current club: _____ Level: _____

Date of Birth: _____ Playing Position: _____

Signature of parent/guardian for all players under 18:

I am happy for my son to participate in the Professional Opportunities Course run by Premier Skills.

Name: _____ Signature: _____

Registration form must be accompanied by course fee.

Please pay \$225 course cost by cheque. All cheques must be made out to Sportsline Marketing Ltd.

Please send cheques to: 17 Johnsvie Tce
Hillcrest
Hamilton