

# **SOUTH UNITED FOOTBALL CLUB**

## **I-LEAGUE YOUTH TEAM TRIALS**

### **2022 - 2023**



**U - 13 Boys - 28<sup>th</sup> August**

**9, 10, 11 years - Born 2010 - 2012**

**U - 15 Boys - 29<sup>th</sup> August**

**12, 13 years - Born 2008 - 2009**

**U - 18 Boys - 4<sup>th</sup> September**

**14, 15, 16 years - Born 2005 - 2007**

**SOUTH UNITED FOOTBALL CLUB**, RBANM's Ground, Gate No. 3,  
Gangadhar Chetty Road, Near Ulsoor Lake, Bengaluru - 560042

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**Note:** Players need to download, fill, scan, and e-mail completed Registration Forms to [info@sufcindia.com](mailto:info@sufcindia.com) by 26<sup>th</sup> August, 2021. Players are also required to carry a hard copy of the Registration Form along with the mentioned documents.

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**Reporting Time: 07:00 AM**



## **SOUTH UNITED FOOTBALL CLUB**



### **I-LEAGUE YOUTH TEAM TRIALS - REGISTRATION FORM 2022 - 2023**

**IT IS MANDATORY TO BRING A GOVERNMENT RECOGNISED COPY OF PLAYER'S AGE PROOF  
TO BE A PART OF THE TRIALS (AADHAAR CARD/PAN CARD/PASSPORT)**

**Full Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Contact Nos.:** \_\_\_\_\_/\_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_ **Blood Group:** \_\_\_\_\_

**Father's Occupation:** \_\_\_\_\_ **Mother's Occupation:** \_\_\_\_\_

**Height (In Centimetres):** \_\_\_\_\_ **Weight (In Kilograms):** \_\_\_\_\_

**Player's Position:** \_\_\_\_\_ **Preferred Foot:** \_\_\_\_\_

**Previous Clubs:** \_\_\_\_\_

**Football Achievements:** \_\_\_\_\_  
\_\_\_\_\_

**Medical Conditions/Injuries:** \_\_\_\_\_

**Passport No.:** \_\_\_\_\_ **Aadhaar Card No.:** \_\_\_\_\_

**Please provide two emergency contact names and numbers:**

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_ **Tel. No.:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_ **Tel. No.:** \_\_\_\_\_

**Heard About the Trials From:**

**Social Media**

**Newspaper**

**Word of Mouth**

**Other (please specify):** \_\_\_\_\_

**MEDICAL RELEASE AND CONSENT:** I certify that my child is in good health and approve of him/her being at the **SOUTH UNITED** programme and participating in its activities. I understand that Soccer is a contact sport and am aware injuries may occur including, but not limited to, physical contact with other individuals and/or athletic equipment and facilities, which may result in cuts, abrasions, sprains, concussions, and fractures. Being fully aware of these facts, I nevertheless voluntarily choose to allow my child to participate in the **SOUTH UNITED** programme, and I assume all risks thereof. I hereby release, acquit, and forever discharge **SOUTH UNITED**, its employees, and volunteers who plan, direct, or otherwise participate in this programme from all actions, accounts of any and all injury, directly or indirectly, sustained by my child. I authorize the **SOUTH UNITED** Staff to act for me according to their judgment in an emergency requiring medical attention.

I hereby declare that neither my child nor any of my household members are COVID-19 positive or have any COVID-19 symptoms. My child will follow all the necessary safety measures and precautions as advised by **SOUTH UNITED FC PVT. LTD.** and its employees. I also declare that **SOUTH UNITED FC PVT. LTD.** will not be held liable if my child is faced with any issues including and/or related to COVID-19.

I hereby consent to the use of my child's photographs by **SOUTH UNITED** for any promotional activities, during or after the Programme.

**Parent's/Guardian's Name:** \_\_\_\_\_

**Parent's/Guardian's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

PHOTO OF  
THE PLAYER

**Please tick your age group:**

**U - 13:** ☐

**U - 15:** ☐

**U - 18:** ☐



## **I-LEAGUE YOUTH TEAM TRIALS - REGISTRATION FORM 2022 - 2023**

**Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Contact Number:** \_\_\_\_\_

**School/College:** \_\_\_\_\_

**Current Standard/Degree:** \_\_\_\_\_

**Year of Completing Last Qualification level:** \_\_\_\_\_

**How did you hear about South United?**

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**Why is your child interested in joining SOUTH UNITED?**

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### **Disclaimer:**

#### **All Players must abide by the following guidelines:**

- 1) All Contact/Personal information required by the **SOUTH UNITED** must be submitted within 10 days of being selected.
- 2) A Player must obtain a No Objection Certificate from the previous Club/Academy (if any) on being selected.
- 3) No Player can play in tournaments/matches, on being selected, without the approval of **SOUTH UNITED**.
- 4) Consumption of Drugs, Alcohol, or any substances that are prohibited by KSFA, AIFF, and FIFA, will not be tolerated by the Academy.
- 5) No Player is allowed to interact with the media regarding the Trials, unless expressly permitted in writing by the **SOUTH UNITED**.
- 6) Should a Player receive an offer from any other Club/Academy, **SOUTH UNITED** must be notified before pursuing a deal.

- 7) **MEDICAL RELEASE AND CONSENT:** I certify that my child is in good health and approve of him/her being at the **SOUTH UNITED** programme and participating in its activities. I understand that Soccer is a contact sport and am aware injuries may occur including, but not limited to, physical contact with other individuals and/or athletic equipment and facilities, which may result in cuts, abrasions, sprains, concussions, and fractures. Being fully aware of these facts, I nevertheless voluntarily choose to allow my child to participate in the **SOUTH UNITED** programme, and I assume all risks thereof. I hereby release, acquit, and forever discharge **SOUTH UNITED**, its employees, and volunteers who plan, direct, or otherwise participate in this programme from all actions, accounts of any and all injury, directly or indirectly, sustained by my child. I authorize the **SOUTH UNITED** Staff to act for me according to their judgment in an emergency requiring medical attention.

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I hereby consent to the use of my child's photographs by **SOUTH UNITED** for any promotional activities, during or after the Programme.

**I have read and accepted the above conditions.**

**Parent's/Guardian's Name:** \_\_\_\_\_

**Parent's/Guardian's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_