

Brazilian International Soccer School

Term 1 Sun Yat Sen – August 23 to December 16

	Website - www.biss.com.hk					
First name:_		Las	t name:		<u> </u>	
Date of birth (DD/MM/YYYY): Age:						
Gender: □ M	ale 🖵 Female.					
		Contact	Information			
Mother's Name: Mother's Mobile number:						
Father's Name:		Father's Mobile number:				
Email Addres	S:					
<u>E</u>	mergency Contact	information (if p	arents are not availab	ole):		
Name:	lame: Contact number: Relationship:					
Does your child have any medical condition the coach should be informed about?						
		Course	Enrollment			
NO CL ASS O	N OCTOBER 25					
DAY	TIME	VENUE	AGE GROUP	FEE	COURSE	
		<u></u>	<u></u>		DURATION	
Wednesday	16:30 to 17:30	<u>SYS</u>	3- 10	\$3,840	16 classes	
		Payme	nt Options			
Please make	the cheque payable	to Sports Talent	t Limited and send i	t together wi	ith this completed form	
to: 410-412 Lockhart Road 4/F Flat C Nin Fung Building — Causeway Bay — Hong Kong or Bank						
Account :HSBC: 023 140916-838 Sports Talent Limited						
Parents/Guardian						
My child,, is in good health and has my permission to						
					irector or coaches the	
responsible 1	for any property los	ss, sickness or in	njury of any kind v	which may l	have resulted through	
participation	in the classes.					
Signature of	novent/avendien.		Date: / /			
Signature of parent/guardian:			Date:/			