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19th April 2010

Dear Parent / Guardian,

Thank you for showing an interest in applying for the **Pro Touch Soccer Academy (PTSA) & Vallance FC (VFC)** East London elite youth development programme. This unique initiative is a joint partnership between two highly recognised organisations in delivering elite and grassroots youth football for number of years in Central and East London.

The programme has been designed to run for 8 weeks as a pilot, in which the qualified (FA Level 2 & 3) and experienced coaching staff will deliver fun, structured and advance coaching sessions. The aim of the sessions will be to find potential young primary school aged (7-11 years old) players to progress onto the main elite Academy based in Islington on Sunday mornings. During every school holidays the Academy organises matches against various professional clubs across the country such as Leyton Orient, QPR and Watford etc.

The programme is each and every Friday starting on **7**th **May until 25**th **June 2010** based at Mile End Sports Centre.

Please report with your son and filled application form IN FULL to;

7-a-side astro turf Pitch 1-2
4.30pm (Registration) 5pm START
Mile End Sports Centre
Rhodeswell Road
Poplar, London E14 7TW

You must bring moulded / astro-turf boots, shin pads, football socks, black or white football short & sweat top along with £2.50 subs each and every session you attend. The places will be allocated by the first 36 players to register, first come first served.

PTSA and VFC can not be held responsible for any lost or damage to participate(s) belonging.

For further information, please contact Mus Turay (PTSA Administrator), direct on 07500 421 944 or Junel Uddin (VFC Sports Officer) on 07956 835 811.

We look forward to seeing you on Friday May 7th.

PTSA & VFC Management



EAST LONDON ACADEMY

APPLICATION MAY 2010

A Parent / Guardian <u>MUST</u> write with BLACK PEN in the space provided CLEARLY filling in every (*) section of this form otherwise it will NOT be accepted.

*Full Name:	
*Date of Birth:	
*Home Tel No.:	*Position: Your Natural Foot:
*Home Address:	
*Post Code: Email:	Borough:
*Emergency Contact Full Name:	
*Telephone No.:	
*School Name:	
*Address:	
*Tel No.: *Pr	imary School Year (e.g. 6):
*Doctor Full Name:	
*Surgery Address:	
* Tel No.:	
Please feel free to add anything you feel will support and encourage your application?	
*Current Club (s) or District you play for:	
*Where did you hear about our programme:	

