INDERDALE						
HIGH SCHOOL		Unde Football Academy			ERDALE HIGH SCHOO Y APPLICATION FORM	
				Year level at	time of entering	the program
	🖵 Year 7	🖵 Year 8	🗅 Year 9	🖵 Year 10	🖵 Year 11	🖵 Year 12
Surname:		Fi	rst Name:			
Date of Birth:			Current Year	Level:	Male/Femal	e (please circle
Name of Parent/Caregive	r:					
Address:						
					_ Post Code: _	
Mailing address: (if differe						
Telephone: Email:						
Football (Soccer) playing e specialist Football (Soccer				nclude state tea	am representatio	on or any
What are the details of th	e best sporting pe	rformances ir	the past 12 m	onths? (e.g. wor	best and fairest f	or my club).
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DECLARATION AND SIGNATURES

I wish to be considered as an applicant for the Underdale High School Football (Soccer) Academy and declare that all the information submitted on this application form is correct. I understand that the school reserves the right to vary or reverse any decision made regarding the enrolment on the basis of incorrect information.

Signature:	Date:
Signature of Parent who is the first legal point of contact:	
ENDORSEMENT BY CURRENT COACH OR REFEREE	
Name of coach:	Phone Number:
Endorsement of Coach:	
Signature of Coach:	
APPLICATIONS TO BE RECEIVED BY FRI	
Please provide a copy of your current reports and any other supporti Please send to: Football Academy Manager Underdale High School	

Underdale High School 19 Garden Terrace UNDERDALE SA 5032

T 08 8301 8000

F 08 8234 2479 E dl.0965_info@schools.sa.edu.au

All applicants will receive a letter from our Football Manager advising them of the date of the trials initially then a follow up letter with the outcome of their application.



Government of South Australia