



Dates								
	Day	Location	Age	Time	April	May	June	July
Kick Start	Tuesdays	Padang, Upper Roof, 1 Utama	All Age Groups	4:30 – 5:30 pm	20, 27	4, 11, 18, 25	, , 8, 15, 22, 29	6
	Thursdays				22, 30	6, 13, 20, 27	, , 10, 17, 24,	1, 8

Dates								
	Day	Location	Age	Time	April	May	June	July
Kick Start	Saturdays	Padang, Upper Roof, 1 Utama	5 – 8 Yr	9 – 10 am	17, 24	1, 8, 15, 22, ,	5, 12, 19, 26	3, 10
			9 – 12 Yr	10 – 11 am				
	Sundays	Padang, Upper Roof, 1 Utama	4 – 7 Yr	9 – 10 am	18, 25	2, 9, 16, 23, ,	6, 13, 20, 26	4, 11
			8 – 14 Yr	10 – 11 am				

Pricing Policy	Per Session		Per Term		Discounts 10% discount for payments received before 02/05/10  Discounts of 20% for the second brother / sister and 30% for the 3rd brother / sister  Discounts are for termly prepayments only.	
	1 session per week	Regular RM 45	Under 6 RM 35	Under 6 RM 350		Regular RM 450
	2 or more sessions per week					RM 800
	10 session pass					RM 400

**Other Notes**

- Cheques payable to: **Little League Soccer Sdn Bhd**, Lot 116B, 2nd Floor, Jalan Burhanuddin Helmi, Taman Tun Dr Ismail, 60000 KL.
- Tel: 03-7710 6101 or (Andy) 019-2123533 or (Michael) 019-2183533 for more details

**TERM APR – JUL 2010**

Applicant's Name:			Date of Birth:		Male / Female:	
Session Day / Venue and Time Applied For:						
Applicant's Address:						
Mobile No:			Email:			
Please disclose any medical condition of the child (eg Asthma, Diabetes etc.):						
Has your child attended Little League Before?			Yes <input type="checkbox"/>		No <input type="checkbox"/>	
How did you hear about Little League?			Poster <input type="checkbox"/>		Leaflet <input type="checkbox"/>	Advert <input type="checkbox"/>
Internet <input type="checkbox"/>		Our Staff <input type="checkbox"/>		Friends <input type="checkbox"/>	Teacher <input type="checkbox"/>	Other <input type="checkbox"/>

In consideration of your acceptance of this application, I undertake that I will not hold Little League Soccer Sdn Bhd or its staff liable for any death or injury sustained by \*myself/my child/my ward as a direct or indirect result of any act, omission, fault, neglect or lack of due diligence of Little League Soccer Sdn Bhd or any of its employees, servants or agents arising out of or in connection with the execution of the training for which I have applied and I further agree to waive any rights under common law or otherwise to bring any action, claim, suit or proceedings in respect thereof.  
(\*Delete as appropriate)

Name of parent: _____
Parent's Signature: _____ Date: ___/___/_____