



Maidstone Community and Islamic Centre  
Telephone: 01622 759973  
Email: [football@maidstonemosque.org](mailto:football@maidstonemosque.org)  
20 – 28 Mote Road, Maidstone, Kent, ME15  
6ES  
Website: [www.maidstonemosque.com](http://www.maidstonemosque.com)



## MAIDSTONE ISLAMIC CENTRE YOUTH FOOTBALL CLUB

Dear Parent/Guardian,

Assalamu'alaikum.

We are excited to launch the **Maidstone Islamic Centre Youth Football Club!**

We would like to invite your child to participate in our MIC Youth Football Club. We will be scheduling regular sessions in the coming weeks ahead, with a view to organise games against other Masajid in the Kent area.

These sessions will be every Sunday at the YMCA, Melrose Close, Maidstone salt 2:30pm- 3:45pm and the first session will be on **Sunday 7<sup>th</sup> July, 2:30pm at YMCA Maidstone.**

If you would like your child to participate, please complete, sign and return the following statement of consent and tick and sign the appropriate options overleaf.

The registration for your child is either 3 months (12 sessions) at a total cost of £35, or 6 months (24 sessions) at a discounted total cost of £60 to be paid on registration. This fee is to cover the mosques cost for the booking of the pitch and equipment/ kits which will be supplied.

Please arrange to pick up and drop off your child (please contact me if you need help or sign the appropriate section if you are allowing permission for your child to leave on their own), provide them with refreshments (water) and appropriate clothing/footwear.

In the unfortunate event of any accidents or injuries, you are agreeable for those present to ensure appropriate medical aid is provided.



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I agree to the statement of consent and would like my child, \_\_\_\_\_

Child's Date of Birth \_\_\_\_\_ to participate in the Maidstone Islamic Centre Youth Football Club Training Sessions.

I have made a payment for my child to participate for: (please tick below)

6 months (£60)

3 months (£35)

Paid by: Bank Transfer / Card Payment (please delete as appropriate)

Parents Name. \_\_\_\_\_

Parents Signature \_\_\_\_\_

Date of Registration \_\_\_\_\_

Emergency Contact Number \_\_\_\_\_

Payment Reference \_\_\_\_\_

Any medical issues your child has that you would like us to be aware of:

\_\_\_\_\_

We would like to use photography/ filming of some of the sessions for promotion/ mosque records/ social media and mosque website.

If you are happy to agree to this, please sign here: \_\_\_\_\_

If you are allowing your child to leave the YMCA premises after the session unaccompanied, please sign the following statement, otherwise leave blank, and the child will wait until a parent/guardian arrives to collect them.

I give permission for my child \_\_\_\_\_ to leave the session unaccompanied.

Signed