# New player registration - Göteborg AFK Marvels, U13

Fill out at least all the mandatory fields, including information for one or more parent(s)! Bring the filled out form to the first try out session or email it to u13@marvels.se before the first session.

See you there!

# Player information

|  |  |  |
| --- | --- | --- |
| NameFirst and last name, mandatory information |  | För och efternamn\* |
|  |  |  |
| Prefer to be called (nickname)Non-mandatory field |  | Ev. smeknamn |
|  |
| Swedish personal number YYYYMMDD-NNNN – Mandatory (date of birth if no pers.no) |  | YYYYMMDD-NNNN\* |
|  |
| EmailOnly if the player has a personal address! Non-mandatory |  | Spelarens epost |
|  |
| Mobile phone noPlayer’s own phone number. Non-mandatory |  | Spelarens mobilnummer |
|  |
| Home addressStreet number city, postal code. Mandatory if no pers. no |  | Spelarens epost |
|  |
| Nationality and languagesMandatory if no Swedish personal number! |  | Spelarens epost |
|  |
| Protected/secret identityIf yes: The player will only be visible for the team lead(s) and administrator(s) on laget.se – not for teammates or visitors. |  |[ ]
|  |
| How did you find American football?Did you play before? Through a friend/relative? Youtube/TV? |  | Tidigare erfarenhet (lag, position) |
|  |
| Did you contact us prior to first tryout?If yes, how? Email/phone/social media? |  | Tidigare erfarenhet (lag, position) |
|  |
| Prior expericence from other sportsWhich sports? Is the player still active in these? |  | Övrig idrottserfarenhet |
|  |
| Other informationAny allergies or other diagnosis that we need to be aware of? Siblings or parents playing for Marvels? Other importand information? |  | Spelarens epost |

# Parent 1 – primary contact person

|  |  |  |
| --- | --- | --- |
| NameFirst and last name. Mandatory |  | Förälders för- och efternamn\* |
|  |  |  |
| Swedish personal number YYYYMMDD-NNNN – Non-mandatory |  | Förälders personnummer |
|  |
| EmailMandatory |  | Förälders epost\* |
|  |
| Mobile phone noMandatory |  | Förälders epost\* |
|  |
| Street addressStreet name and number. Mandatory |  | Förälders gatuadress\* |
|  |
| Postal code and cityMandatory |  | Förälders epost\* |
|  |
| Knowledge of the sportPlays/has played, fan of the sport or novice? Non-mandatory |  | Kunsap om amerikanske fotboll |
|  |
| Facebook profileIf we may contact you through messenger |  | Facebookprofil) |
|  |
| Other important information regarding parent 1F ex spoken langauages |  | Förälders epost\* |

# Parent 2 (non-mandatory)

Other contact information can be added in laget.se once email is added

|  |  |  |
| --- | --- | --- |
| Name |  | Ange namn |
|  |  |  |
| Email |  | Ange epost |
|  |
| Mobile phone no |  | Ange epost |

# Parent 3 (non-mandatory)

Other contact information can be added in laget.se once email is added

|  |  |  |
| --- | --- | --- |
| Name |  | Ange namn |
|  |  |  |
| Email |  | Ange epost |

# Parent 4 (non-mandatory)

Other contact information can be added in laget.se once email is added

|  |  |  |
| --- | --- | --- |
| Name |  | Ange namn |
|  |  |  |
| Email |  | Ange epost |