

# FCV GLADIATOR SOCCER

TRAINING CAMPS IN NIGERIA



**FCV** INTERNATIONAL  
FOOTBALL ACADEMY

**REGISTER NOW**

**EASTER FOOTBALL CAMPS**

**LAGOS: 1ST - 5TH APRIL 2024**

**GRANGE SCHOOL, GRA, IKEJA**

**OGUN: 7TH - 12TH APRIL 2024**

**TRINITY INT'L COLLEGE, OFADA**

**20  
24**

OPEN TO  
**BOYS  
& GIRLS**  
AGES: 6-18  
YEARS

PLAYING FAIR. CONQUERING FEAR.



## FCV / GSA Development Camps Registration Form

First Name (s) \_\_\_\_\_ Surname Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Nationality \_\_\_\_\_ State of Origin \_\_\_\_\_ Religion \_\_\_\_\_

Address \_\_\_\_\_

Town/City \_\_\_\_\_ LGA \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile \_\_\_\_\_

Twitter Handle \_\_\_\_\_ Facebook ID \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Parents Work Number \_\_\_\_\_ E-mail \_\_\_\_\_

Playing Position \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Name of School \_\_\_\_\_

Preferred Camp Location (Please tick as appropriate) Lagos  Ogun

Additional Information

## Nutritional Information

Please inform us of any dietary requirements, food allergies or any food the player will not eat


Please list any other specific requirement we may need to know of

## Player Qualification

Girls and Boys ages 6-18 years in elementary or secondary school are qualified to register for the football camps.

We advise that children registering for the boarding camps are ages 13 years and above

## Camp Fees

Registration + Residential: N215,000 includes accommodation and meals

Registration + Day Camp: 195,000: includes lunch

### **Early Registration**

*(On or before 15<sup>th</sup> March, 2024)*

*Gets a set of Personalized  
Gladiator Soccer Jersey*

## Payment Method

Payment can be made to any of:

1. Dynaspro Promotions Limited –Zenith Bank: 1220365832

2. Dynaspro Camps & Events –GTBank: 0514578087

**(Please note that all payments must be made in the child's name)**

*Do not apply for this program unless a student of elementary, secondary or A Levels school.*

## Items To Bring To Camp

S/N	Item	Number
1.	Casual Wear	7 (sets)
2.	Casual Footwear	1 pair
3.	Bath/Face Towel	2 each
4.	Bath Slippers	1 pair
5.	Toiletries	(1 week supply)
6.	Underwear / Innerwear	7 each
7.	Night Dress / Pyjamas	2 pairs
8.	Sport Wear	6
9.	Trainers	1 pair
10.	Soccer Boot	1 pair

## Player Benefits

- World class football training
- Olympic Value Education Program
- Football & Education Program
- Leadership and Financial Literacy
- Health and Exercise as a Lifestyle
- Social Skills and General Etiquette
- Foreign assessment by FCV
- Scouting opportunities from premiership and champion team and other European Club
- \*4 outstanding Players (15 yrs+) will be offered a two-week stay at FCV International Football Academy Base in the UK

**NB: PLEASE:** No Cash Allowed in camp, No Provisions allowed,

All Personal items must be clearly marked,

No Phones or electrical gadgets allowed

## Camp Venues

### **LAGOS:**

GRANGE SCHOOL

Harold Sodipo Crescent, GRA, Ikeja

Lagos, Nigeria

RESIDENTIAL:

**ARRIVAL:** 4.pm-6.pm, **Sunday 31<sup>st</sup> March, 2024**

**DEPARTURE:** 10am-12am, **Friday 5<sup>st</sup> April, 2024**

DAY CAMPERS:

ARRIVAL 9am, DEPARTURE 3PM daily

### **OGUN:**

TRINITY INTERNATIONAL COLLEGE

Ofada,

Ogun State, Nigeria

RESIDENTIAL:

**ARRIVAL:** 4pm-6pm, **Sunday 6<sup>st</sup> April, 2024**

**DEPARTURE:** 10am-12am, **Friday 12<sup>th</sup> April, 2024**

DAY CAMPERS:

ARRIVAL 9am, DEPARTURE 3pm daily

### Emergency Contact

These are very important to us. If your child becomes ill during the day, we may need to be able to contact you, or someone acting for you, please give two emergency contact numbers. Occasionally a student needs urgent medical attention and it is essential that we can get in touch with you.

#### Emergency Contact 1

First name (s) \_\_\_\_\_ Surname \_\_\_\_\_  
Daytime Telephone \_\_\_\_\_ Evening Telephone \_\_\_\_\_  
Mobile \_\_\_\_\_ Relationship \_\_\_\_\_

#### Emergency Contact 2

First name (s) \_\_\_\_\_ Surname \_\_\_\_\_  
Daytime Telephone \_\_\_\_\_ Evening Telephone \_\_\_\_\_  
Mobile \_\_\_\_\_ Relationship \_\_\_\_\_

### MEDICAL DETAILS

NAME \_\_\_\_\_  
GENOTYPE \_\_\_\_\_  
BLOOD GROUP \_\_\_\_\_  
FAMILY DOCTOR'S NAME \_\_\_\_\_  
TEL \_\_\_\_\_  
HOSPITAL ADDRESS \_\_\_\_\_

### Declaration

I certify that I have read, understood and answered all question of this form to the best of my ability and knowledge;

I have no reason to believe that my health will interfere with my ability to undertake the participation of physical sessions for which I have applied. Or affect to give good attendance. I understand that withholding information or knowingly giving incorrect information, about my health on this form may result in the care given by inaccurate or incomplete information.

I accept that on no occasion, the details provided to FCV/GSA camps could result in a formal offer being rescinded.

I also agree to inform FCV/GSA immediately should any of the contact details above change.

Parent/Guardian

First Name (s) \_\_\_\_\_ Surname \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_  
Relationship \_\_\_\_\_

When complete please return this form with proof of payment to:

- The School where you registered
- gladitoracademy12@gmail.com (scan and send)

For more Information, Telephone: 0802 352 2804, 0808 375 4707, 0703 342 0295

**Please Note** that no refund will be honoured four weeks to the commencement of the camp.