Please read the British American Football Association official schools’ programme ‘Touchdown Football’ pdf document before completing this registration form.

BAFA Touchdown Football Registration Form

*Contact Name:*

*Contact Email:*

*Contact Telephone / Mobile:*

*Name of School:*

*Address:*

*Town / County:*

*Post Code:*

*Please tick one box:* Developer School Participator School

*Please indicate the type of football activity being delivered at your school;*

Touchdown 1

Touchdown Plus

Touchdown Lombardi

*Please underline which year groups will be or are involved;*

*Primary: Yr5 Yr6*

*Secondary: Yr7 Yr8 Yr9 Yr10 Yr11 Yr12 Yr13*

*Please download, complete and return this form by email to;*

[schools@britishamericanfootball.org](mailto:schools@britishamericanfootball.org) *Thank you!*