

Date:

Application Form for Canary Wharf Cup Seven-a-side Football Tournament • Saturday 29th October 2011

Seven-a-side Football Tournament • Saturday 29th October 2011						TheFA
Name of Team:						10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Name of Manager:					10 10 0	
Address (inc postcode):					CHARTER	
						STANDARD CLUBS
						ΛΛ
Telephone/Mobile:						/Y\.
Email:						
Age Category: Year		r 6 & 7 (Un		Year 8 & 9 (Under 14)		
	(Please delete as appropriate)	ropriate) Born afte		/ 08 / 99	Born after 31/08/97	
Players	Name		Age	Date of Birth	Name of School Attended	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
All section has to be filled in correctly or players will not be registered. All players must be able to identify themselves and to certify their age. Acceptable forms of identification include the following:						
•	Passport, School Pass (Photo ID), Medic	al Cards, l	Birth Certificate		
Sana Mi Underwo	oplication form, payment of entry lah by Monday 24th October 201 lood Road, London E1 5AW. Ple Sana Miah on 020 7247 8080.	1 by 7p	m . The ac	ddress is as follow	s: Osmani Trust, Osmani Cer	ntre, 58
Please note: Osmani Trust will on the day use filming and photography for use in our publications, website and marketing materials. These are for both internal and external audiences. If you or any player does not want to be filmed or photographed please let Sana Miah know.						
	that the above information is tru from the tournament:	e. I unde	erstand th	at if the information	on is untrue then my team ma	y be

Name: _____

Signature: