



APPLICATION FORM

13th July 2019 - Mile End Leisure Centre

Team/Club	Age Group		Manager/Coach	
Address				Postcode
Telephone		Mob	oile	
E-mail				
L-man				
PLAYERS REGISTRATION DETAILS				
Name	Dat	e of B	irth Cu	rrent School Year
1.				
2.				
3.				
4.				
5.				
6.				
				
7.				
8.				
DECLARATION:				
Signature	ame			Date

I declare that the above information is true. I understand that if the information is untrue then my team may be expelled from the tournament.

I/we have permission from participant's parents/guardians for pictures to be taken and used of my team in Osmani Trust's publicity materials as and when required:

The above information will be used in accordance with our Privacy Statement which can be found on our website www.osmanitrust.org