

## MIGHTY SOCCER STARS FOOTBALL CLUB/ACADEMY

## TRIAL/SCREENING FORM

Full Name:	
Address:	TOOTBALL.
	G F C
Date of Birth:	Place of Birth:
State:	,Local Government:
Phone number:	, (2) :
Previous Club/Academy:	
Ability:	, Foot:
Position:	Jersey No:
NOTE OF REASON WHY Y	OU CHOOSE MSS FC
NOTICE	
This is to inform us that all in	erested players for this Trial has to pay the sum of #3,000 Only
(Three Thousand Naira Only	) for Accommodation & Trial form.
Selected players will be joini	ig our Team of Grade A
Unselected players will be Jo	ining our Academy Team of Grade B.
oignad, managamant	Date:
signed: management	signed Applicant