

## **UNDER 11 TEAM REGISTRATION FORM**

(This form must be completed in full and submitted with all required documents)  Team Name:					
City: _	County: _		Country:		
Team	Contact Person:	Pho	Phone:		
No	NAME	D.O.B	AGE	PARENT CONTACT	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
	COACH	i/MANAGER DECLARATI	ON		
	COACH rm that all listed players are within the c	correct age for this category o	and that parent		

verification, and may use event photos/videos for official communication and promotion.

Coach/Manager Name:
Signature:
Date:















