



# AMSoccer St Andrews Cup 2017



## Team application

Club/Team Name:	
League Name:	
Primary Shirt Colour:	
Secondary Shirt Colour:	
Team Website:	
Age Group (year of birth)	
Gender:	

## Coach Details

Name:	
Address:	
Postcode:	
Tel:	
Mobile:	
Email:	

## First Aider

Name:	
Address:	
Postcode:	
Tel:	
Mobile:	
Email:	

Suggested ability: To maximise every child's experience please advise on the collective ability of your team:      **Below Average** [ ]    **Average** [ ]    **Above Average** [ ]

## Please select the relevant Festival

- Friday 4th August**      2008 Festival - 7 aside - £75 per team
- Saturday 5th August**      2007 Festival - 7 aside - £75 per team
- Sunday 6th August**      2006 Festival - 7 aside - £75 per team


Please find enclosed payment of £\_\_\_\_\_ Cash [ ]      Cheque [ ]

A photographer/ Video operator will be present to take images of the tournament. Please indicate if you do/ do not wish for you team to be used in future publications.

Signed: ..... Date: .....

Please return payment to: AMSoccer, Cuparmuir Industrial Estate, Cuparmuir, Cupar, Fife, KY15 5RL, TEL: 01334 657790    EMAIL: lindsaysharp@amsoccerclub.org

**Important :** Please note that entries that are withdrawn cannot be refunded.