



AYIA NAPA YOUTH SOCCER FESTIVAL 2012
APPLICATION FORM

NAME OF TEAM

CONTACT NAME / GROUP LEADER.....

PERS.TEL EMAIL.....TEAM COLOURS.....

NO OF PLAYERS..... TOTAL GROUP NO..... ARRIVAL DATE..... DEPARTURE DATE.....

ADDRESS STREET.....TOWN / CITY.....

AREA..... COUNTRY..... POST CODE.....

TEL. NUMBERS 1 2..... FAX. NO.

AGE GROUP & CATEGORY OF BOYS BORN

1996	1997	1998	1999	2000	2001	2002	2003	2004
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ON BEHALF OF THE ABOVE TEAM I (GROUP LEADER) HEREBY APPLY FOR ENTRY IN YOUR
YOUTH SOCCER FESTIVAL AND WISH TO MAKE USE OF YOUR PARTICIPATION & ACCOMODATION PACKAGE.

SIGNATURE (GROUP LEADER)..... DATE.....

AYIA NAPA YOUTH SOCCER FESTIVAL 2012



NAME OF TEAM

CONTACT NAME / GROUP LEADER.....PERS.TEL.....

NAME LIST OF PLAYERS & TEAM OFFICIALS OF AGE GROUP

COACH NAME..... ASSISTANT COACH.....

PHYSIO / DOCTOR..... TEAM ESCORT.....

<u>PLAYERS' NAMES</u>	<u>BIRTHDATES</u>	<u>PLAYERS' NAMES</u>	<u>BIRTHDATES</u>
1.....	12.....	.....
2.....	13.....	.....
3.....	14.....	.....
4.....	15.....	.....
5.....	16.....	.....
6.....	17.....	.....
7.....	18.....	.....
8.....	19.....	.....
9.....	20.....	.....
10.....	21.....	.....
11.....	22.....	.....