



ENTRY FORM

BURTON YOUTH FOOTBALL CLUB

Saturday 23rd May 2020 am – U8, U12 & U15 pm U10, U14 & U7
Sunday 24th May 2020: am U6, U9 & U11 pm – U13 & U16

Please note: We will confirm your entry into the tournament **via e-mail**, so please ensure the correct e-mail address is entered on the form

Name of club:

Secretary name:

County & Affiliation No.:

Team name(s):

Contact details:

Name and address:

Telephone number:

Mobile number:

E-mail address:

Please indicate the number of teams for entry. Entry is on a first come first serve basis. No cancellation refunds will be given later than 30 days before the event.

U6	No. of teams requested	<input type="text"/>	U11	No. of teams requested	<input type="text"/>
U7	No. of teams requested	<input type="text"/>	U12	No. of teams requested	<input type="text"/>
U8	No. of teams requested	<input type="text"/>	U13	No. of teams requested	<input type="text"/>
U9	No. of teams requested	<input type="text"/>	U14	No. of teams requested	<input type="text"/>
U10	No. of teams requested	<input type="text"/>	U15	No. of teams requested	<input type="text"/>
Entry fee is £35 per 6-a-side team and £25 per 5 a side team.			U16	No of teams requested	<input type="text"/>

Please return this form along with your cheque made payable to **Burton Youth Football Club**,
To Mr. P. Groves, 9 Champion Grove, Christchurch, Dorset, BH23 3RF or tell Mobile 07947617691
(Bacs payment accepted please call) E Mail: burtonyouthfc@hotmail.com

I, _____ (insert name of team official) of _____ (insert team name) have been provided with a copy of the rules and regulations of the tournament and do hereby agree for and on behalf of The said team to conform to those rules and regulations and to accept, abide by and implement the decisions Of the Committee of the Competition, subject to right of appeal in accordance with Rule 12.