APPLICATION FORM

ALI EIGATIONI OTIMI																			
Club Name:								Affi	Affiliation Number:										
Contact Name:						D)AI				Con	Contact Email:								
Emergency Contact No:										2 nd	2 nd Emergency Contact No:								
Full Contact Address:																			
Day / Date Registrat					tratio	ion Time Se			Scheduled Start					2020/2021 Age Groups					
Saturday 18 th July AM				08:	08:30 - 08:45			09:00				MIXED U7, U11 GIRLS - U11/12, U13/14							
Saturday 18 th July PM				13:	13:00 – 13:			15 13:30			MIXED L				U8, U12 & U15				
Sunday 19 th July AM				08:30 - 08:45			15 09:00			:00	MIXED U			U9, U	J9, U13, U17/18 GIRLS - U15, U16				
Sunday 19 th July PM 13				13:	00 – :	00 – 13:15			13:30			MIXED U10, U14, U16							
TEAMS TO ENTER (please note the number of teams being entered in the box(s) below)																			
			BOYS	S/MIXE	D <u>2</u>	2020/2021 Age Group				ups	ıs				GIRLS 2020/2021 Age Groups				
U7s	U8s	U9s	U10s	U11s	U12	2s	U13s	U1	4 s	U15s	U:	16s	U1	7/18s	U11/U12s	U13/14s	U15 or U16s		
If entering more than one team in the same age group please specify team names. Blues and Yellows																			
ENTRY COST PER TEAM ONLY £30 – ENTER BY 31 st MARCH AND PAY ONLY £25!!																			
CLUB DISCOUNT – 1 FREE TEAM FOR EVERY 4 ENTERED (SO 5 TEAMS FOR THE PRICE OF 4!!!) Must be entered at same time.																			
THERE IS A MAXIMUM OF 10 PLAYERS PER TEAM.																			
AGE QUALIFICATIONS ARE AS PER <u>2020-21 SEASON</u> . PLAYERS MUST HAVE A SUITABLE PROOF OF AGE DOCUMENTS. U7s MUST BE AT LEAST 6 YEARS OF AGE.																			
Please return this completed form together with your consent form and your payment to Brian Porter, 3 Packwood																			
Close, Daventry, NN11 8AJ. Text 07903 859 107 if you have any queries or to check availability email																			
club.secretary@dtfc.co.uk Cheques payable to Daventry Town Juniors Football Club																			
You can also email this form to club.secretary@dtfc.co.uk and make a BACS payment to Account no: 33707197																			
Sort Code: 52-30-21. Please enter a reference to identify your team e.g. u7BYFT for Byfield u7 Tigers when making																			
the payment and type this reference here																			
Confirmation of your entry will be sent on receipt of your application and payment. An information pack will be																			
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For D	TFC U	ise i	Entry No	P	ayr	nent Ty	ре а	ınd ı	value	е					Consent Form				