



UMBRO F.A.I. JUNIOR CHALLENGE CUP ENTRY FORM SEASON 2008/2009

PLEASE USE BLOCK CAPITALS

NAME OF TEAM

LEAGUE AFFILIATED TO

SATURDAY [] SUNDAY []

HON. SECRETARY

ADDRESS

.....

.....

PHONE NO. HOME WORK MOBILE

e-mail

EMERGENCY NUMBER:

GROUND:

PLEASE STATE: LOCAL AUTHORITY [] PRIVATE []

COLOURS {1}{2}.....

KICK-OFF TIME MORNING [] AFTERNOON []

PLEASE NOTE ALL TEAMS MUST HAVE PUBLIC LIABILITY INSURANCE.
PLEASE STATE POLICY NUMBER ON FORM.

POLICY NUMBER RENEWAL DATE:

INSURANCE COMPANY:

ENTRY FEE €25

THIS FORM SHOULD BE RETURNED TO THE SECRETARY OF YOUR LEAGUE
AND SAME WILL THEN BE FORWARDED TO THE SECRETARY OF THE F.A.I.
JUNIOR COUNCIL AT ABBOTSTOWN, DUBLIN 15.

CLOSING DATE IS MONDAY 25th AUGUST 2008.

SIGNED

TITLE DATED

PLEASE COMPLETE

RECEIVED FROM THE SUM
OF €25 IN RESPECT OF ENTRY TO THE UMBRO F.A.I. JUNIOR CUP.

SIGNED

TITLE DATED