**FC CHIPPENHAM 6-A-SIDE TOURNAMENT**

**25th – 26th MAY 2019**

One entry form per age group - additional copies are available on [www.fcchippenhamyouth.org.uk](http://www.fcchippenhamyouth.org.uk) Enclose SAE if confirmation is required by post.

Please send the completed form **BEFORE 26th APRIL 2019** with a cheque payable to FC Chippenham Youth to:

Mr. Keith Ballinger, 17 Lady Coventry Road, Chippenham, Wiltshire, SN15 3NF
(email: fccytournament@outlook.com)

**Places will not be confirmed until after the Closing Date**.

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| **Club Name:** |       |
| **FA Affiliation Number:**  |       |
| **Team Contact (Manger):** |       |
| **Manager Email:** |       |
| **Manager Mobile:** |       |
| **Manager Address (inc Postcode):**  |       |

 **ENTRIES**

|  |  |  |  |
| --- | --- | --- | --- |
| **Age Group** | **Team Name**  | **Manager** **(if different from above)** | **Manager Email****(if different from above)** |
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 **I enclose the entry fee of £20.00 (per team) – before 5th April 2019 or £25.00 (per team) by 26th April 2019.

Acceptance forms to be emailed to: -
Email:** **Please enclose a stamped address envelope for written confirmation (if required).**