

Newcastle



Mini Soccer

APPLICATION FORM SEASON 2009-10

Please complete one form for each team you wish to enter.

Name of Club													
Name of Team													
Age Group (please circle)	Under 8	Under 9	Under 10										
Name of Manager													
Have you attached a copy of Level 1 Certificate Minimum Requirement for this manager?	Yes/No												
What is the CRB number for this manager?													
Telephone Number 1 (main contact)													
Telephone Number 2 (alternative contact)													
Email Address (all correspondence will be conducted using e-mail for season 2009-2010)													
	@												
Have you attached a cheque for £50.00 made payable to Newcastle Mini Soccer?	Yes/No												
Details from Season 08'-'09 Give details of league activity if this team played last season. Would you like to enter this team into a non competitive Development league if it were to be established?													

Please post to arrive by no later than 3rd July 2009 to Newcastle Mini Soccer, c/o NEWCASTLE EAST END, Swans Recreation Ground, Stotts Road, Walkergate, Newcastle upon Tyne NE6 4UP