

**ENTRY FORM**

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| **COMPETITION:** |  | | | | |
| **DATES COMPETITION:** |  | **COUNTRY** | | |  |

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| **PLAYERS** | | | | | |
| *Shirt No.*  *1 – 32* | *Family Name*  *(PRINTED – BLOCK LETTERS)* | *First Name*  *(PRINTED - BLOCK LETTERS)* | *Date of Birth*  *(dd/mm/yyyy)* | *Age* | *International Matches* |
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| Team Manager:  Stand-in Manager:  (Must not be Coach, Assistant Coach or Team Doctor  Team Doctor: | Coach:  Assistant Coach:    Physiotherapist: | |
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| **TEAM COLOURS**  Shirt:  Shorts:  Socks:  Goalkeeper shirt:  (Must be of a color different to both primary and alternate colour of shirt) | **ALTERNATIVE COLOURS**  Shirt:  Shorts:  Socks:  Goalkeeper shirt:  (Must be of a color different to both primary and alternate colour of shirt) | |
| **One set must comprise at least 80% single colour per piece**  **Goalkeeper shirt must be of a color different to both primary and alternate color of shirt** | | |
| Name: | | Date: |
| Role/Position: | | Signature: |