

42nd AYR INTERNATIONAL - SCOTLAND CUP

SOCCER SEVENS FESTIVAL – ROZELLE

SATURDAY 25TH & SUNDAY 26TH MAY 2019

PLAYER REGISTRATION FORM

TEAM NAME.....

Age Class.....

SYFA ID..... (if applicable)

Number	SYFA Player ID	Players First Name	Surname	Date of Birth
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

**ALL THE INFORMATION MUST BE COMPLETED IN FULL
OTHERWISE YOUR PLAYER WILL NOT BE ALLOWED TO PARTICIPATE IN THE FESTIVAL.**

**NOTE: if your team is in membership of the SYFA and the player is registered for your club for this season
ONLY THE SYFA PLAYER ID Number and NAME ARE REQUIRED.**

COMPLETED FORMS MUST BE RETURNED BY FRIDAY 17TH MAY

EITHER BY EMAIL OR POST TO

SCOTLAND CUP, 15 HIGHHOUSE VIEW, AUCHINLECK. KA18 2LD

NO REGISTRATION FORMS WILL BE ACCEPTED ON SATURDAY 25TH MAY

Signature of Secretary / Coach.....

Print Name.....

Mobile No

Scotland Cup, 15 Highhouse View, Auchinleck, Cumnock. KA18 2LD