

42nd AYR INTERNATIONAL SCOTLAND CUP – PLAYER REGISTRATION FORM

TEAM NAME..... Age Class..... SYFA ID.....(if applicable)

Number	SYFA Player ID	Players First Name	Surname	Address	Town	Post Code	Date of Birth
1							
2							
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ALL THE INFORMATION MUST BE COMPLETED IN FULL – OTHERWISE YOUR PLAYER(S) WILL NOT BE ALLOWED TO PARTICIPATE IN THE TOURNAMENT.

NOTE: if your team is in membership of the SYFA and the player is registered for your club for this season – ONLY THE PLAYER ID, 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