**Club Registration Form 2019**

|  |  |  |  |
| --- | --- | --- | --- |
| **Club Name** |  | | |
| **Main Club Contact** | Name:  Address:  DOB:  Tel Home: Work: Mb:  Email: | | |
| **Additional Club Contact** | Name:  Address:  DOB:  Tel Home: Work: Mb:  Email: | | |
| **Emergency Contact** |  | | |
| **Number of Teams?**  **(Tick appropriate box in the table)** | | **50+ Division** | **65+ Division** |
| **1** | |  |  |
| **2** | |  |  |
| **3** | |  |  |
| **4** | |  |  |
| **5** | |  |  |
| **League Fixture Facility** |  | | |
| **Name of Training Facility** |  | | |
| **Day team trains on** |  | | |
| **Team Kit Colours** |  | | |

**Please post completed team registration form to the Cumberland FA by Friday 18th January 2019. Email:** [**Ray.sempill@cumberlandfa.com**](mailto:Ray.sempill@cumberlandfa.com)

**Ray Sempill**

**Cumberland Football Association**

**Unit 3 & 4  
Tithe House**

**Cockermouth**

**CA13 9QW**