

APPLICATION FORM

DURHAM COUNTY FA



BISHOP AUCKLAND HEART FOUNDATION CHARITY CUP – SEASON 18-19

TEAM NAME

CONTACT NAME

ADDRESS

POSTCODE

TELEPHONE

MOBILE

EMAIL

CURRENT LEAGUE

AFFILIATION NO.

GROUND DETAILS (IF KNOWN)

POSTCODE

SHIRT COLOURS (IF KNOWN)

HOME

SHIRT

SHORTS

SOCKS

AWAY

SHIRT

SHORTS

SOCKS

**I ENCLOSE PAYMENT OF £10 ENTRY FEE. (IF CHEQUE OR POSTAL ORDER PLEASE MAKE PAYABLE TO 'DCFA').
ALL ENTRY FORMS TO BE RETURNED BY WEDNESDAY 1ST AUGUST 2018**

SIGNATURE

DATE

THE INFORMATION PROVIDED IS TO ENSURE THAT YOUR CLUB ARE ELIGIBLE TO PLAY IN THIS COMPETITION AND WILL BE ENTERED ONTO THE FA FULL TIME SYSTEM WHICH IS FULLY COMPLIANT WITH DATA PROTECTION LEGISLATION.

WEB: DURHAMFA.COM
TWITTER: @DURHAMFA
FACEBOOK: DURHAMCOUNTYFALEAGUES
INSTAGRAM: @DURHAMCOUNTYFA