

	<b>East Region Qualifying Tournament</b>  <b>Registration Form</b> <b>2021-22</b>	
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**Club Name:** **U14/U16 (Delete where applicable)**  
**Kit Colours :** **Bibs:**

	Name	Affiliation No.	D.O.B.		Club Contact Address	
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
Coach			Phone:		Email:	
Main emergency contact			Phone:		Email:	
scorer			Phone:		Email:	

**Coach to sign to confirm validity of information provided on this page**

*I (Coach/ captain) agree that all the players named above are eligible signed..... Date.....*

**Registration sheets must be logged with the Regional League organiser in accordance with the timescales on the entry form. Send to: Claire Southam [clairessco@hotmail.com](mailto:clairessco@hotmail.com)**