

Youth Cup 2019

APPLICATION FORM

NAME OF THE TEAM:

	✓		MEN / WOMEN ✓
1 Handball	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
2 Volleyball	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
3 Basketball (3 on 3)	<input type="checkbox"/>	U16 <input type="checkbox"/> O16 <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4 Football (3 on 3)	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
5 Tug of War (1 on 1)	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
6 Billiard (Doubles)	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>

Please
Attach
ID card
copies of
Players
and
Officials

PLAYERS

NO	NAME	CONTACT NO (If no officials are listed)	NATIONAL ID CARD NO	D.O.B
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

NO	NAME	NATIONAL ID CARD NO	DESIGNATION	CONTACT NO
			Official	
			Official	

Everyone who takes part in the above tournaments should be below 35 Years

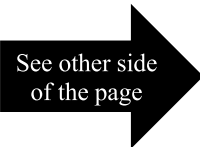
THIS FORM SHOULD BE SUBMITTED BEFORE 2300HRs OF 21st JULY

Manager's Signature: _____

OFFICE USE ONLY

Received by: _____
Date: _____
Signature: _____

See other side
of the page



HANDBALL

Maximum 7 players and 2 officials can be listed on a team

VOLLEYBALL

Maximum 10 Players and 2 officials can be listed on a team

Basketball (3 on 3)

Maximum 4 players and no officials can be listed on a team

Football (3 on 3)

Maximum 4 players and 1 official can be listed on a team

Billiard

2 players must be in a team

Tug of War

This is an individual challenge

Note: Participants must be below 35 years as at 31st July 2019