



## ELDON CELTIC FOOTBALL CLUB

**SUMMER FOOTBALL TOURNAMENT**  
**Saturday 14<sup>th</sup> June and Sunday 15<sup>th</sup> June 2008.**

### APPLICATION FORM

YOU CAN USE THIS FORM TO ENTER ANY NUMBER OF TEAMS FOR ANY AGE GROUPS.  
 WE WILL CONFIRM TEAM NAMES WITH YOU BEFORE PRINTING OUR TOURNAMENT PROGRAMME.

Name of Club:	County Affiliation Number:
Contact Name:	Email:
Contact Address including Postcode:	Contact Phone Numbers:

Please indicate below the number of teams you would like to enter per age group

<b>Saturday 14<sup>th</sup> AM</b>	<b>Number of Teams</b>
Under 8's	
Under 12's	
Under 14's	

<b>Saturday 14<sup>th</sup> PM</b>	<b>Number of Teams</b>
Under 8's	
Under 10's	
Under 16's	

<b>Sunday 15<sup>th</sup> AM</b>	<b>Number of Teams</b>
Under 7's	
Under 11's	
Under 13's	

<b>Sunday 15<sup>th</sup> PM</b>	<b>Number of Teams</b>
Under 7's	
Under 9's	
Under 15's	

Total number of teams:	£25 per team	Payment enclosed	£
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Please send your completed Application Form with your cheque, made payable to  
 ELDON CELTIC FOOTBALL CLUB to:

Malcolm Hillen  
 Secretary, Eldon Celtic FC  
 1 Beck Court  
 Morgan Road  
 Reading  
 Berks  
 RG1 5EU