**DON BOSCO INTER SCHOOL FOOTBALL TOURNAMENT 2024-2025**

 **ENTRY FORM**

 **UNDER 17 YEARS (GIRLS) TEAM**

NAME OF THE SCHOOL--\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SCHOOL ADDRESS-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF THE COACH/TEAM MANAGER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE OF THE COACH/TEAM MANAGER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE NUMBER OF THE COACH/TEAM MANAGER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 LIST OF PLAYERS (TO BE TYPED)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| SR.NO  | JERSEY NO  | FULL NAME OF THE STUDENTS | GR. NO  | DATE OF BIRTH |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |

I certify that:

1. The particulars entered above are according to the General Register of the schools/NGO’S.

2. No changes in the above list of players shall be made by any one rather than above mentioned Officials or me, for which I shall intimate to you in writing.

3. I have gone through all the rules and regulations of the tournament/games and shall abide by it.

Yours Faithfully,

School Seal Principal

 **DON BOSCO INTER SCHOOL FOOTBALL TOURNAMENT 2024-2025**

 **ENTRY FORM**

 **UNDER 16 YEARS (BOYS) TEAM**

NAME OF THE SCHOOL--\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SCHOOL ADDRESS-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF THE COACH/TEAM MANAGER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE OF THE COACH/TEAM MANAGER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE NUMBER OF THE COACH/TEAM MANAGER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 LIST OF PLAYERS (TO BE TYPED)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| SR.NO  | JERSEY NO  | FULL NAME OF THE STUDENTS | GR. NO  | DATE OF BIRTH |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |

I certify that:

1. The particulars entered above are according to the General Register of the schools/NGO’S.

2. No changes in the above list of players shall be made by any one rather than above mentioned Officials or me, for which I shall intimate to you in writing.

3. I have gone through all the rules and regulations of the tournament/games and shall abide by it.

Yours Faithfully,

School Seal Principal