

NICSSA SUMMER SOCCER LEAGUE 2017

Event	NICSSA Summer Soccer League 2017
Venue	The Pavilion, Stormont
Date of event	Starts Tuesday 2 nd May 2017
Closing date for entries	Friday 21 st April 2017

Please complete all sections in BLOCK CAPITALS. NICSSA membership numbers must be included.

Section 1: Team Details:

Team Name:	
Kit Colour:	
Contact Name:	
Telephone No.:	
Email:	

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Section 2: Player Details

Player 1 / Captain:

Title: Forename: Surname:
 Date of Birth:

Address (for communication)	
Postcode:	
NICSSA Member No.:	
Work Telephone No.:	
Email:	

Player 2:

Title: Forename: Surname:
 Date of Birth:

Address (for communication)	
Postcode:	
NICSSA Member No.:	
Work Telephone No.:	
Email:	

Player 3:

Title: Forename: Surname:
 Date of Birth:

Address (for communication)	
Postcode:	
NICSSA Member No.:	
Work Telephone No.:	
Email:	

Player 4:

Title: Forename: Surname:
Date of Birth:

Address (for communication)	
Postcode:	
NICSSA Member No.:	
Work Telephone No.:	
Email:	

Player 5:

Title: Forename: Surname:
Date of Birth:

Address (for communication)	
Postcode:	
NICSSA Member No.:	
Work Telephone No.:	
Email:	

Player 6:

Title: Forename: Surname:
Date of Birth:

Address (for communication)	
Postcode:	
NICSSA Member No.:	
Work Telephone No.:	
Email:	

Player 7:

Title: Forename: Surname:
Date of Birth:

Address (for communication)	
Postcode:	
NICSSA Member No.:	
Work Telephone No.:	
Email:	

Player 8:

Title: Forename: Surname:
Date of Birth:

Address (for communication)	
Postcode:	
NICSSA Member No.:	
Work Telephone No.:	
Email:	

Player 9:

Title: Forename: Surname:
Date of Birth:

Address (for communication)	
Postcode:	
NICSSA Member No.:	
Work Telephone No.:	
Email:	

Player 10:

Title: Forename: Surname:
Date of Birth:

Address (for communication)	
Postcode:	
NICSSA Member No.:	
Work Telephone No.:	
Email:	

Player 11:

Title: Forename: Surname:
Date of Birth:

Address (for communication)	
Postcode:	
NICSSA Member No.:	
Work Telephone No.:	
Email:	

Player 12:

Title: Forename: Surname:
Date of Birth:

Address (for communication)	
Postcode:	
NICSSA Member No.:	
Work Telephone No.:	
Email:	

Player 13:

Title: Forename: Surname:
Date of Birth:

Address (for communication)	
Postcode:	
NICSSA Member No.:	
Work Telephone No.:	
Email:	

Player 14:

Title: Forename: Surname:
Date of Birth:

Address (for communication)	
Postcode:	
NICSSA Member No.:	
Work Telephone No.:	
Email:	

Player 15:

Title: Forename: Surname:
Date of Birth:

Address (for communication)	
Postcode:	
NICSSA Member No.:	
Work Telephone No.:	
Email:	

Player 16:

Title: Forename: Surname:
Date of Birth:

Address (for communication)	
Postcode:	
NICSSA Member No.:	
Work Telephone No.:	
Email:	

Section 3: Payment

Total Amount Enclosed: £	No. of cheques enclosed
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The entry fee will be £140.00 per team and cheques should be made payable to 'NICSSA Sport & Leisure' and should accompany the entry form. Card payments can be made by calling The Pavilion, Stormont on (028) 9052 0404

Any enquires directly linked to the event should contact Michael Armstrong on 028 9076 5770 or e-mail michael.armstrong@nicssa.co.uk

Signed: Date:

Please send all entries to:

events@nicssa.co.uk by the closing date of Friday 21st April 2017