

League Secretary
Mr. R. Smith,
9 Shepherds Rise,
Vernham Dean.
Andover,
SP11 0HD
Tel: 01264 737373
E-Mail: secretary@twyfl.co.uk



1st April 2010

LEAGUE APPLICATION FORM SEASON 2010/2011

Please find attached application form to compete in the Testway YFL for season 2010/11. All **registration fees** must be paid with this application, failure to do so will mean the form being returned to you.

All new clubs will be required to pay an additional deposit of £20; if the club is not accepted into the league at the AGM the deposit and subscription fees will be returned.

County Affiliation Numbers – last year several clubs gave the previous season's affiliation number. Please leave the box blank if you have not received your number for the 2010/11 season, forward the FA registration number to the League Secretary as soon as you receive it.

If a particular age group does not run due to insufficient numbers, all fees paid by your club for the relevant age group will be refunded.

No refunds will be made if your club withdraws any age group once the application has been received.

The league plans to run all age groups, under 8's to under 18's providing there are sufficient numbers. Under 18's cover the ages 15, 16 and 17.

Under 11's you will have the option of applying to play 7x7 for ages 9 and 10 years or 9x9 for age 10 years only.

Under 12's can continue to play 9x9, but they must have larger pitches and junior size goals (16ft x 7ft). This option will only take place if there are the necessary numbers.

APPLICATIONS FROM MEMBER CLUBS MUST BE RECEIVED NO LATER THAN THE 31ST MAY 2010.

APPLICATIONS FROM NEW CLUBS MUST BE RECEIVED NO LATER THAN THE 20TH MAY 2010.

New clubs will be invited to meet the Management Committee during June to discuss their application.

Testway Youth Football League's AGM will be held on the 21st June 2010, at Andover New Street, Andover.

Roger Smith, League Secretary



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LEAGUE APPLICATION FORM SEASON 2010/2011

MEMBERSHIP OF LEAGUE

Name of Club

We are a Member Club

We are a new club applying for Membership

** Please tick as appropriate*

As a new club I have enclosed deposit of £20

£ _____

The club wishes to enter _____ team(s) in Mini Soccer @ £42.50 per team

£ _____

The club wishes to enter _____ team(s) in 11 a side @ £52.50 per team

£ _____

TOTAL ENCLOSED

£ _____

Please make cheque payable to the Testway Youth Football League

Please complete the following form

Does your club intend to enter the Hampshire Saturday Cup competition, if so, which age groups, please tick relevant box.

Under 11's		Under 13's	
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If you are entering Under 11's in the league please tick box applicable

7 x 7 aside including ages 9 and 10 years

9 x 9 aside age 10 years only

9 x 9 aside under 12's (age group 10 and 11)

RULE 18 OF THE TESTWAY YOUTH FOOTBALL LEAGUE TROPHY: LEGAL OWNERSHIP, CONDITIONS OF TAKING OVER, AGREEMENT TO BE SIGNED, and AWARDS

The club agrees to abide by rule 18 concerning the ownership and safe keeping of the Testway YFL trophies, if your club should become winners of such a trophy.

Signed by the Club Secretary _____ dated _____

Signed by the Club Chairman _____ dated _____



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CLUB DETAILS

CLUB NAME IN FULL	
COUNTY AFFILIATION NUMBER (if not available please forward as soon as you receive it, please do not enter last season number)	
GROUND LOCATION POST CODE if possibly	
CLUB COLOURS	
WEB SITE	

CLUB OFFICERS

CLUB CHAIRMAN	
ADDRESS (incl: Post Code)	
TELEPHONE NUMBER	
MOBILE NUMBER	
E-MAIL ADDRESS	

CLUB SECRETARY	
CRB DISCLOSURE NUMBER	
ADDRESS (incl: Post Code)	
TELEPHONE NUMBER	
MOBILE NUMBER	
E-MAIL ADDRESS	

CHILD WELFARE OFFICER	
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CRB DISCLOSURE NUMBER	
CERTIFICATE NUMBER	
ADDRESS (incl. Post Code)	
TELEPHONE NUMBER	
MOBILE NUMBER	
E-MAIL ADDRESS	

CLUB TEAMS

Please complete for each age group, copy onto a separate piece of paper if necessary.

AGE GROUP	UNDER
TEAM MANAGER	
CRB DISCLOSURE NUMBER	
ADDRESS (incl: Post Code)	
TELEPHONE NUMBER	
MOBILE NUMBER	
E-MAIL ADDRESS	
ASSIST. MANAGER	
TELEPHONE NUMBER	
MOBILE NUMBER	

AGE GROUP	UNDER
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TEAM MANAGER	
CRB DISCLOSURE NUMBER	
ADDRESS (incl. Post Code)	
TELEPHONE NUMBER	
MOBILE NUMBER	
E-MAIL ADDRESS	
ASSIST. MANAGER	
TELEPHONE NUMBER	
MOBILE NUMBER	

AGE GROUP	UNDER
TEAM MANAGER	
CRB DISCLOSURE NUMBER	
ADDRESS (incl. Post Code)	
TELEPHONE NUMBER	
MOBILE NUMBER	
E-MAIL ADDRESS	
ASSIST. MANAGER	
TELEPHONE NUMBER	
MOBILE NUMBER	

AGE GROUP	UNDER
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TEAM MANAGER	
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ADDRESS (incl. Post Code)	
TELEPHONE NUMBER	
MOBILE NUMBER	
E-MAIL ADDRESS	
ASSIST. MANAGER	
TELEPHONE NUMBER	
MOBILE NUMBER	

AGE GROUP	UNDER
TEAM MANAGER	
CRB DISCLOSURE NUMBER	
ADDRESS (incl. Post Code)	
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ASSIST. MANAGER	
TELEPHONE NUMBER	
MOBILE NUMBER	

AGE GROUP	UNDER
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AGE GROUP	UNDER
TEAM MANAGER	
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AGE GROUP	UNDER
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TEAM MANAGER	
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AGE GROUP	UNDER
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MOBILE NUMBER	
E-MAIL ADDRESS	
ASSIST. MANAGER	
TELEPHONE NUMBER	
MOBILE NUMBER	

HAVE YOU COMPLETED ALL THE DETAILS?

IF MORE TEAMS COPY TABLE AND COMPLETE

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