**REGISTRATION**

**UP Futsal League 2025/Spring**

|  |
| --- |
| **Team name:** |
| **Captain name:**  |
| **E-mail adress:**  |
| **Phone number:** |

|  |  |  |  |
| --- | --- | --- | --- |
| NAME | Date of birth | Place of birth | Mother’s maiden name |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

\* In the tournament every team needs 10 players, minimum 8.

\* I agree that our team registrate for the tournament, and pay the registration fee, which costs 10000 HUF.

Captain sign :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sports Office sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_