

# THE MCAST 5-A-SIDE FOOTBALL TOURNAMENT.

## STAFF APPLICATION FORM.

Team name: \_\_\_\_\_.

Institute: \_\_\_\_\_.

Contact number: \_\_\_\_\_.

Player's names:

1. \_\_\_\_\_.

2. \_\_\_\_\_.

3. \_\_\_\_\_.

4. \_\_\_\_\_.

5. \_\_\_\_\_.

6. \_\_\_\_\_.

\*10 Euro entry fee.

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Application form must be handed to Luke Taliana by Friday 18<sup>th</sup> December.

Contact number: 79485907

E-Mail: [luke.taliana@mcast.edu.mt](mailto:luke.taliana@mcast.edu.mt)