

THE MCAST 5-A-SIDE FOOTBALL TOURNAMENT.

STUDENTS APPLICATION FORM.

Team name: _____.

Institute: _____.

Contact number: _____.

Player's names:

1. _____.

2. _____.

3. _____.

4. _____.

5. _____.

6. _____.

*10 Euro entry fee.

Application form must be handed to Christian Degabriele by Friday 18th December.

Contact number: 79932145 E-Mail: christian.joseph.degabriele@mcast.edu.mt