



**THE FAW
WOMEN'S CUP**

FA WALES
**Women's Cup
2015/2016**



Entry form for the FAW Women's Cup Competition Season 2015/2016



Please print and return or Email lkelly@faw.co.uk

Clubs are to be advised that the standard fine for withdrawing from the Women's Cup is £150

Exact Name of Club:								
Name of Club Secretary:								
Address:								
		Postcode:		Email:				
Telephone:	Home:		Work:		Mobile:			
Name of Club Manager:								
Address:								
		Postcode:		Email:				
Managers Telephone:	Home:		Work:		Mobile:			
Official Facebook:				Official Twitter:				
Address of Registered Ground (where all home cup ties are to be played)							Postcode:	
Ground Telephone:								
Is a First Aid Kit available at the Ground?							Yes/No	
Are goal nets and Corner Flags used in all ties at your Ground?			Yes/No					
Is the field of play more than 80 x 50 Yards (73.15 x 45.72 Metres) and less than 120 x 100 Yards (109.73 x 91.44 Metres)							Yes/No	
League in which team participates:				Division:				
Area Association to which the club is affiliated:								
Club Colours:								
1 st Strip	Shirts:			Shorts:			Socks:	
Change Strip:	Shirts:			Shorts:			Socks:	
WOMEN'S CUP COMPETITION		FEE: (Including VAT)		£20.00		CLOSING DATE		30th June 2015

Please enter _____ FC
for the Women's Cup Competition for Season 2015/2016.

I enclose the required fee of £ _____

Method of Payment (delete as appropriate): Credit or Debit Card / Cheque / Postal Order / Cash

(Please do not send cash by post. Cheques and Postal Orders to be made payable to **Football Association of Wales**)

Card Details

Card Type (delete as appropriate): VISA / MASTERCARD / MAESTRO

(Please note American Express or Electron cannot be accepted)

Number:

Valid From: / Expiry Date: /

Issue Number (if applicable): Security Number (last 3 digits on back of card):

On behalf of _____ Football Club, I can confirm that I have received, read and understand the Competitions Rules for the FAW Women's Cup Competition, which the aforementioned Football Club has entered for the 2015/16 season.

As an authorised signatory of the Football Club, I confirm that we will abide by the Rules of the Competitions entered and fully understand that a breach of the Rules is subject to sanction by the FAW, which could result in a fine and withdrawal from the competition.

Signed: _____

Position: _____

Date: _____

THE COMPETITION RULES CAN BE DOWNLOADED FROM THE FAW WEBSITE – www.faw.org.uk

This form, when completed, should be forwarded to
**Competitions Department, Football Association of Wales, 11/12 Neptune Court,
Vanguard Way, Cardiff, CF24 5PJ.
lkelly@faw.co.uk**

Date Received (For Office Use Only)

Affiliation Number (For Office Use Only)



Football Association of Wales
11/12 Neptune Court
Vanguard Way
Cardiff
CF24 5PJ