

Football Pitch Application

(This application applies for one season only, as specified by the applicant on this form)

Applicant Details:							
Team Name:							
Season:							
Applicant Name:							
Address:							
Postcode:							
Tel No.							
Mob No.							
Email							
Pitch Requested: (Pl	ease indicate a first and						
City Playground:		Wash Commo					
Day Required (please	indicate preferred / no	rmal star	t times)				
Saturday a.m.:					day a.m.:		
Saturday pm.:				Sund	day p.m.:		
Please telephone you the date required. The Every effort will be a pitches we cannot g	Telephone No: 0 made to accomm	7538 3 iodate	27633 your reque	est, h	owever owi		g the week prior to y demand for football
Alternative pitches v	will be offered w	here a	vailable if y	our f	irst choice is	s already alloca	ated.
Please return this co Community Services tina.sukhatska@nev	ompleted applica s Team, Newbury	tion fo	rm along v	vith a	copy of the	Public Liabilit	y Insurance to
Declaration							
I confirm that I have abide by those item		-	-			enditions of Hi	re and agreed to
Signed:							
Print Name:							
Position within orga	anisation:						
Date:							
Office Use Only	Date received:				Pitch	Allocated	Yes / No

Town Hall, Market Place, Newbury, RG14 5AA