**JUNIOR SIAM FESTVAL 2024**

**PLAYER REGISTRATION FORM**

AGE GROUP: TEAM: CLUB:

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| --- | --- | --- | --- | --- |
|  | **Frist Name** | **Surname** | **Date of Birth** | **RFU ID Number** |
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Lead Coach:

Assistant Coaches:

Team Manager:

Contact details day: Name –

 Mobile –

**RETURNED TO STEVE MELBOURNE –** stevemelbourne@rfu.com

**BY WED 10 APRIL 2024**