

## **ASISC SUBROTO CUP PRELIMINARY CHAMPIONSHIP**

ASISC SUBROTO CUP Preliminary Championship will be held on 22nd and 23rd June, 2019 at Ambedkar Stadium, Ernakulam. We invite the last year's ICSE State Championship Semi-Finalists for the Championship. If schools are interested to send other teams, kindly contact the undersigned. The registration fee is Rs.5000/- per team. Food and accommodation should be arranged by the respective schools.

The last date to confirm your registration is on 13<sup>th</sup> June, 2019 via email to Don Bosco Senior Secondary School, Vaduthala: [sdbschool@gmail.com](mailto:sdbschool@gmail.com).

For further details contact: *Mr.Syamnath G,*

*Contact No: 8075373767.*

For further details regarding Subroto Cup: <http://www.subrotocup.org>

**Fr. Varghese Edathichira SDB**

PRINCIPAL  
DON BOSCO SENIOR SECONDARY SCHOOL  
VADUTHALA, KOCHI-682 023.



## ENTRY FORM

### CISCE PRE-SUBROTO CUP 2019 UNDER 17 Boys

(The columns marked with (\*) are mandatory.  
The form would be deemed incomplete without these)

1. Name of the School\*: \_\_\_\_\_

2. Full Address\* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Telephone/ Contact Number\*: \_\_\_\_\_

4. E-mail ID\* \_\_\_\_\_

S.No.	*Name of the Player (BLOCK Letters)	*Date of Birth	*Jersey No.	*Playing position	*Unique e-mail id	*Unique Moblie No.
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						

**A Player to be eligible must be on the rolls of the school from the beginning of the academic term and should be born on or after 01 January 2003. All players are to be in possession of original Aadhar Card/ Passport with them at the time of tournament.**

- 5. Full Name of the Manager : \_\_\_\_\_
- 6. Contact No. of Manager : \_\_\_\_\_
- 7. Full Name of the Coach : \_\_\_\_\_
- 8. Contact No. of Coach \* : \_\_\_\_\_
- 9. Full Name of the Captain: \_\_\_\_\_
- 10. Contact No. of Principal\* : \_\_\_\_\_  
& Teacher-in-charge : \_\_\_\_\_

I certify that the above-named players are bonafide students of this school and are fully qualified to play for the school.

Place: \_\_\_\_\_  
\*(Signature & Seal of Principal)

Date: \_\_\_\_\_  
\*(Seal of School)

---

**COUNTER SIGNATURE**

Verified and Recommended.

\_\_\_\_\_  
\*(Signature and seal of the Principal Coordinator)