

Éire Óg Oxford

Éire Óg Youth Sevens Tournament Entry Form

Please complete all sections

Club Name:		
Club County:		
Club contact travelling with the team:		
Phone: (N	Nobile):	
Email:		
Club Colours:		
Please select which Age Group(s) your Club will participate in:		
U-8 U-10	U-12	
No. of Players in total travelling with your Club:		
Mentor Details		
Mentors Names		
1.	3.	
2.	4.	
Signed: Date:		
Éire Óg contact Stuart Midgley secretary.eireog.hertfordshire@gaa.ie		
07711370453		



Éire Óg Oxford

Éire Óg Youth Sevens Tournament Entry Form

Please complete all sections

Club Name:		
Club County:		
Club contact travelling with the team:		
Phone: (N	Nobile):	
Email:		
Club Colours:		
Please select which Age Group(s) your Club will participate in:		
U-8 U-10_	U-12	
U-8 U-10 No. of Players in total travelling w		
No. of Players in total travelling w		
No. of Players in total travelling w		
No. of Players in total travelling w Mentor Details Mentors Names	ith your Club:	
No. of Players in total travelling w Mentor Details Mentors Names 1.	ith your Club:	
No. of Players in total travelling w Mentor Details Mentors Names 1. 2.	ith your Club: 3. 4.	

