

دورة ند الشبا الرياضية 2019
NAS SPORTS TOURNAMENT 2019
بطولة ند الشبا لكرة القدم للصالات
NAS FUTSAL CHAMPIONSHIP



DATE: .. / .. /

PLAYER AGREEMENT FORM

I, hereby (as per the passport), holder of
..... passport number (Expired on .. / .. /),
confirm my agreement to participate in NAS FUTSAL CHAMPIONSHIP 2019 for the
..... TEAM.

By signing this agreement, I acknowledge and agree to the Rules & Regulations of the
Championship.

PLAYER NAME:

.....

PLAYER SIGNATURE:

.....

It is requested to fill the form and upload it to register the player in the team during the assigned registration period.