

NAME OF CLUB:

Churches Football Association Sydney Inc.

www.cfasydney.com.au PO Box 58 Yagoona NSW 2199

Phone number: 0458 003 495 Email Address: secretary@cfasydney.com.au

ABN: 42 519 430 447



FORM B – Provisional

Indicative 2024 TEAM ENTRIES

U17 Youth Seniors – Premier	15 (mixed). U9 Girls (9 League, Raahauge C aside), O35 (9 a side),	up, Sydney Cup	, , ,	ls (11 a side)	
Age Group /Division	Grade Sought	Grade played last year	Squad or single team (seniors only)	Comments	
This form duly c	ompleted must be re	eturned to the C	hurches Football A	Association Sydney Inc.	
Name: (Club Secretary)		s	Signed: (Club Secretary)		
(Club Se	ecretary)		(Club Secretary)		
Name: (Club President)		S	Signed: (Club President)		
(Club Pr	esident)		(Club President)		