



SANLAM
KAY MOTSEPE
SCHOOLS CUP

Investing in our youth

In association with



SCHOOL REGISTRATION FORM

This form can only be signed by the principal of the school concerned.

NAME OF SCHOOL:

POSTAL ADDRESS :

..... POSTAL CODE:

PHYSICAL ADDRESS:

..... POSTAL CODE:

TELEPHONE NUMBER:

FAX NUMBER:

E-MAIL:

PROVINCE:

MAGISTERIAL DISTRICT:

NAME OF SCHOOL PRINCIPAL:

PRINCIPAL'S CONTACT NUMBERS: AND

NAME OF TEAM MANAGER:

MANAGER'S CONTACT NUMBERS: AND

PRINCIPAL'S SIGNATURE:

SCHOOL STAMP:

