

# Hitchin Town Football Club



## Mascot Request Form

|                                                                                                                                                                                                                                                                                      |                                      |                               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------|
| Is the request for:                                                                                                                                                                                                                                                                  |                                      |                               |
| Individual <input type="checkbox"/>                                                                                                                                                                                                                                                  | 2-3 persons <input type="checkbox"/> | Team <input type="checkbox"/> |
| Name(s) of Individual(s):<br>_____<br>_____<br>_____                                                                                                                                                                                                                                 |                                      |                               |
| Name of Team:<br>_____                                                                                                                                                                                                                                                               |                                      |                               |
| Contact details of person requesting Mascot allocation:                                                                                                                                                                                                                              |                                      |                               |
| Name:                                                                                                                                                                                                                                                                                | _____                                |                               |
| Telephone:                                                                                                                                                                                                                                                                           | _____                                |                               |
| Email address:                                                                                                                                                                                                                                                                       | _____                                |                               |
| Relationship to Mascot(s): _____                                                                                                                                                                                                                                                     |                                      |                               |
| Would you like some information about the Mascot(s) included in the Match Day Programme?:                                                                                                                                                                                            |                                      |                               |
| Yes <input type="checkbox"/>                                                                                                                                                                                                                                                         | No <input type="checkbox"/>          |                               |
| <b><i>If yes, please can you email any information and/or photos with this application. We will do everything possible to ensure inclusion in the Match Day Programme, but in cases of short notice requests this might not be possible if print deadlines would not be met.</i></b> |                                      |                               |
| Are there any other considerations you would like us to be aware of:<br><br><br>                                                                                                                                                                                                     |                                      |                               |
| Signed:                                                                                                                                                                                                                                                                              | Print Name:                          |                               |