

Mascot Request Form - Season 2022-23

Is the request for:		
Individual \square	2-3 persons	Team \square
Name(s) of Individual(s) or team:		
-		
-		
Name of Team:		
Contact details of perso	n 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?:		
	es No 🗆	
If yes, please can you email any information and/or photos with this application to:		
<u>mascots@hitchintownfc.club</u> . 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. In signing this form, you give your parental/guardian		
consent for us to photograph mascots and reproduce these photographs in our Match Day Programme and on our social media platforms.		
In the case of teams, it is the responsibility of the Team Coach to obtain parental consent		
from parents of all players before signing this form.		
Are there any other considerations you would like us to be aware of:		
Signed:	Print Name:	



OUR PARTNERS:





