



**6<sup>th</sup> INTER SCHOOL HANDBALL TOURNAMENT – 2020**  
**DELEGATION ALBUM FOR REGISTRATION**

Handball Team of:

Age Group: [U15] [U17] [U19]

Players

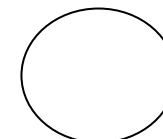
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Name and title of the Team's Responsible Person: .....

Signature: .....

School Stamp:



*\*Form submission deadline is 01<sup>st</sup> March 2020*