## STOCKPORT METROPOLITAN BOROUGH COUNCIL FOOTBALL PITCH APPLICATION FORM **SEASON 2025-26**

Club Name:		Team Name (e.g.1st):				
		P	Please select one:	Junior Team	Senior Team	
League: Please selec	et .	D	Division:			
Club Secretary:						
Address of Secretary:						
•						
Postcode:						
Secretary Contact De	etails:					
Daytime Telephone Number:						
Mobile Telephone Number:						
Email address:						
Alternative Club Con	tact:					
Name:						
Daytime Telephone Number:						
Mobile Telephone Number:						
	Email address:					
Ground requested:						
Ground Used Last Se	eason:					
Please tick the appropriate box to confirm what allocation is required						
A WEEK	SAT		SUN	AM	PM	
B WEEK	SAT		SUN	AM	PM	
Pitch Only				Pitch & Cha	nging	

## Please return your completed form as requested If you have any enquiries please contact your League representative or Janette Sadgrove – Greenspace Project Officer 0161 217 6111 The Neighbourhoods Team, 4th Floor, Stopford House, Stockport SK1 3XE

Signature of Secretary:	Date:	