



MALTA FOOTBALL ASSOCIATION SUSPENDED OR INJURED PLAYER

(To be handed to the MFA Official in charge of Venue)

Date:	_____
Competition:	_____
Venue:	_____
Club:	_____
Match:	_____ vs _____

I, the undersigned hereby request the Malta Football Association to admit the following player/s in the VIP Area for the above mentioned match as he/they is/are serving a suspension imposed to him/them by the MFA Disciplinary Commissioner.

- | | |
|----------|-------------------|
| 1. _____ | ID Card No: _____ |
| 2. _____ | ID Card No: _____ |
| 3. _____ | ID Card No: _____ |
| 4. _____ | ID Card No: _____ |

I, the undersigned hereby request the Malta Football Association to admit the following player/s in the VIP Area for the above mentioned match as he/they is/are currently unavailable to form part of the squad because of injury.

- | | |
|----------|-------------------|
| 1. _____ | ID Card No: _____ |
| 2. _____ | ID Card No: _____ |
| 3. _____ | ID Card No: _____ |
| 4. _____ | ID Card No: _____ |
| 5. _____ | ID Card No: _____ |
| 6. _____ | ID Card No: _____ |

I, the undersigned hereby confirm that the above details are correct.

Name of Hon. Secretary: _____

Signature of Hon. Secretary: _____