

South Chiltern Minor League

Registration No:

I CONFIRM THAT THE PHOTOGRAPHS ARE CURRENT, PASSPORT SIZED AND A TRUE LIKENESS:

Signed:.....
Club Secretary/Team Manager

THE TEAM WILL ABIDE BY THE RULES OF THE LEAGUE. THE INFORMATION ON THIS FORM IS CORRECT.

Signed:.....
Club Secretary/Club Chairman

PLAYERS MUST NOT COMPLETE FORMS FOR MORE THAN ONE TEAM

New Registration Application Form

Current Details

All details in this box must be completed:

I (Full Name):

Apply to be registered as a playing member of:

Name of Team:

Age Group:

My Current/Last School:

Date of Birth:

--	--	--	--	--	--

PROOF OF DATE OF BIRTH MUST ACCOMPANY THIS FORM

Did You play for a Different S.C.M.L Team Last Season: YES/NO

If Yes Which Team:

Age Group:

Signed Player:..... Date:

I the Parent/Guardian, consent to my Child playing in the above league and agree that he/she will abide by the rules of the league and that the date of birth shown above is correct.

Signed (Parent/Guardian).....

One Passport

Photo to be

Glued

Here

One Passport

Photo to be

Paper

Clipped

Here

South Chiltern Minor League

Registration No:

I CONFIRM THAT THE PHOTOGRAPHS ARE CURRENT, PASSPORT SIZED AND A TRUE LIKENESS:

Signed:.....
Club Secretary/Team Manager

THE TEAM WILL ABIDE BY THE RULES OF THE LEAGUE. THE INFORMATION ON THIS FORM IS CORRECT.

Signed:.....
Club Secretary/Club Chairman

PLAYERS MUST NOT COMPLETE FORMS FOR MORE THAN ONE TEAM

New Registration Application Form

Current Details

All details in this box must be completed:

I (Full Name):

Apply to be registered as a playing member of:

Name of Team:

Age Group:

My Current/Last School:

Date of Birth:

--	--	--	--	--	--

PROOF OF DATE OF BIRTH MUST ACCOMPANY THIS FORM

Did You play for a Different S.C.M.L Team Last Season: YES/NO

If Yes Which Team:

Age Group:

Signed Player:..... Date:

I the Parent/Guardian, consent to my Child playing in the above league and agree that he/she will abide by the rules of the league and that the date of birth shown above is correct.

Signed (Parent/Guardian).....

One Passport

Photo to be

Glued

Here

One Passport

Photo to be

Paper

Clipped

Here