



SOUTH LANCASHIRE COUNTIES FOOTBALL LEAGUE

PLAYERS REGISTRATION FORM



NOTE: all areas marked with an Asterik * MUST be completed before submitting to the Registration Secretary

It is the clubs responsibility to ensure all players are registered correctly

Registration will be refused if any document is incomplete In accordance with the Rules and Regulations of the above League, I wish to be registered as a playing member of the under mentioned Club:

Name of Club*.....FC. SEASON...2009/10..

Players Full Name*(BLOCK CAPITALS).....

Players Address*(IN FULL).....

..... Post Code*.....

Date of Birth*..... (For players under the age of 17 / 18 on the 31st August 2009 Wishing to play youth football must send in 2 passport photographs and proof of date of birth with this registration form as per rule 8q. Last seasons registration I D cards will not count for this season).

PLAYERS DECLARATION

I am not a contract player, and furthermore I confirm that I have not signed another registration form For any other Club within Membership of the League (except in accordance with Rule 8(b).

LAST SEASON I was a registered Player with*.....

Players Signature*.....Date*.....

Witness to Signature*.....

The Club confirms that the player has been asked to confirm that he has not signed another registration form for any other club within membership of the league (except in accordance with Rule 8(b)) and has no financial obligations to any other club

YOUTH
TEAMS
PASTE
PHOTO
HERE

Registration Date

Signature of Club Secretary*..... Registration Number

SOUTH LANCASHIRE COUNTIES FOOTBALL LEAGUE

CLUB REGISTRATION RECEIPT

Season 2009/10.....

To the Club Secretary of *.....F.C.

Player *.....

Is registered for your Club from this date.....

Registration Number

TO BE USED ONLY WHEN DE-REGISTERING A PLAYER

The player named above has no financial obligations to the club, On receipt of this completed form by the Registration Secretary, the player will be transferred from the club to the South Lancashire Counties Football League. A transfer form must be completed if the Player wishes to play for another club

Club*.....

Signed*.....Club Secretary. Date*.....

Signed.....Reg'n Secretary. Date.....

South Lancashire Counties Football League	
YOUTH TEAMS PASTE PHOTO HERE	Youth Certificate of Registration
	Reg Number
	Name
	Club
	Date of Birth
	Reg Sec Signature
Season	2009-10