WALLASEY JUNIOR FOOTBALL LEAGUE

2017/2018 REGISTRATION DETAILS FOR GIRLS SECTION

PLAYERS DETAILS		THE PLAYER IS NOT ELIGIBLE TO PLAY UNTIL THE CLUB SECRETARY IS IN RECEIPT OF THE PLAYER'S REGISTRATION	
Age Group:		CARD.	N 3 REGISTRATION
Player's Name:		The Club Secretary by signing this form agrees that the date of birth and all other details are as stated and that he/she will be held accountable to the league should this information be proven to be incorrect.	
Date of Birth:/			
Address:		All parts of the form MUST BE COMPLET	ED IN INV. First names
Post Code:		are required, initials will not be accepted.	
Serious Medical Condition/Disability:		Where necessary please enclose a COPY Birth Certificate or Passport to confirm date of birth. DO NOT SEND ORIGINAL	
Emergency Contact No		DOCUMENTS	
DECLARATION : The player by signing this Registration form is declaring that she does not play for any other club or team in this League, that her details are correct (including any serious medical conditions) and that she is aware of these points. The player must agree to abide by the League Rules before		Any form submitted NOT FULLY COMPLETE or without the appropriate FEE or without TWO current passport size photographs affixed (not stapled) WILL BE RETURNED and the registration will not be considered until the FULLY COMPLETED form has been re-presented.	
playing in any WJFL Cup competition.		TEAM MANAGERS MUST HAVE THE REGISTRATION CARD AT ALL GAMES ORGANISED BY WJFL.	
A STAMPED SELF-ADDRESSED	ENVELOPE MUST BE EN	ION SECRETARY FOR GIRLS CLOSED FOR THE RETURN OF THE REC	
WALLASEY JFC (Girls Section)		WALLASEY JFC (Girls Section)	
2017/18 PLAYERS REGISTRATION FORM		Affiliated to Wirral and Cheshire Associations 2017/18 PLAYERS REGISTRATION CARD	
Under Division: Club			
Team Name (if applicable)		Under Division: Club	
Player's First Name(s)(PRINT)		Team Name (if applicable)	
Player's Surname (PRINT)		Player's First Name(s)(PRINT)	
Date of Birth/ Date of Signing//		Player's Surname (PRINT)	
Full Address		Date of Birth/ Date of Sig	
Post Code(MUST BE INCLUDED)	—— Photo No 1	School	
(MUST BE INCLUDED) School	Current	Class/Year (as of Sept 2017)	Photo No 2 Current
Class/Year (as of Sept 2017) Club last signed for (Must be complete	Passport Size and ed) MUST NOT	Any Serious Medical Condition/Disability	Passport Size and MUST NOT
Season last signed: 20/	exceed this area	Emergency Contact Number(s):	exceed this area
Signature of Player:			_
Signature of Parent/Guardian:		TEAM MANAGERS MUST HAVE THIS REGISTRATION CARD AT ALL GAMES ORGANISED BY WJFL	
Name of Parent/Guardian (PRINT):		Registrars Signature:	
Signature of Secretary	Reg No:		Reg No: