APPLICATION FOR ENTRY TO THE WALLASEY JUNIOR FOOTBALL LEAGUE FOR SEASON 2017/2018

Please use block capitals to complete form

<u>11</u>	v 11 Secti	on	ly apply for the follow	ving tooms to compate in	the Wallasey Junior Football League	F.C.	(Block Capitals)	
	-				Signature			
					(Mobile)			
					Signature			
CW	O FAN No.		Date of	Safeguarding Children Co	ourse	Date of WOW		T
Age	Number of Teams	Team Names	Colours	Ground (If LA please state ground you will apply for)	Manager's Name & Assistant Manager's Name	Home Telephone Number	Mobile Telephone Number	Does this person currently have a WJFL ID Card and Lanyard? YES or NO
Under 13's								
Under 14's								
Under 15's								
Under 16's								