<u>APPLICATION FOR ENTRY TO THE WALLASEY JUNIOR FOOTBALL LEAGUE FOR SEASON 2025/2026</u>

Please use block capitals to complete form

11 v 11 Section							
	wish to provisionall	ly apply for the following	g teams to compete in t	the Wallasey Junior Football League fo	or Season 2025/2026		
Secretary's	Name			Signature			
Address							
Post Code		Tel No: (Home))	(Mobile)			
Email addre	SS						
Club Welfar	re Officers Name			Signature			
Age Group	Team Name	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 have a DBS Child Safeguarding, & FA First Aid
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PLEASE COMPLETE AND RETURN THIS FORM TO THE LEAGUE SECRETARY