



WEST CHESHIRE A.F. LEAGUE

Regn. No.

Season 201 /201

REGISTRATION OF PLAYER YOUTH DIVISION.

I hereby desire to be registered as a playing member of the.....
Football Club in strict accordance with the Rules and Regulations of the West Cheshire Association Football League.
I promise further not to sign a Registration Form for any other club in the above League before obtaining a
TRANSFER signed by the Secretary of the above mentioned club.

TO BE COMPLETED BY THE SECRETARY OF THE CLUB.

Player's Surname..... Christian Name(s).....

Present Address.....

.....Post Code.....

Tel. No.

Club last signed for Players date of birth

1. The League is an FA Charter Standard League and has signed up to the FA's RESPECT programme. By signing this form you agree to adhere to the Rules of the League and the guidelines of Charter Standard and RESPECT programmes.

2. The information you provide will be held by the League and will be handled in accordance with our Privacy Notice which is published in the League Handbook and conforms to the General Data Protection Regulations 2016. Your information will also be held on the FA's Whole Game System.

3. To consent to your name and image appearing in WCFL updates and newsletters, please tick here

Signature of Player.Date of Signature

Parent/Guardian Name in BLOCK LETTERS

Signature of Parent/Guardian.Date of Signature

Any known long term illness/condition of Player.

..... Emergency Tel No.

CLUB SECRETARY'S SIGNATURE

IMPORTANT. TWO CONSECUTIVE PASSPORT SIZE PHOTOGRAPHS MUST BE ENCLOSED WITH THIS FORM.

WEST CHESHIRE ASSOCIATION FOOTBALL LEAGUE
YOUTH DIVISION. Season 201.../ 201...

Date Of Birth REGN. No.

I HEREBY CERTIFY that I have this day registered

As a youth division player of Football Club.

Date Signed

[Youth Registration Secretary]

Club Secretaries to fill in player's name, date of birth and Football Club on Counterfoil before returning.

Stamped addressed envelope MUST be enclosed for return of Counterfoil and Identification Card.