



HUDDERSFIELD JUNIOR FOOTBALL LEAGUE  
 PLAYER REGISTRATION FORM  
 Season 2010-11

PLAYER'S NAME

DATE OF BIRTH .....

HOME ADDRESS .....

I wish to be registered as a player of  FC UNDER

and agree to comply with the rules and regulations of the Huddersfield JFL.

PLAYER'S SIGNATURE .....  
 PARENT/GUARDIAN SIGNATURE .....

State which Huddersfield JFL Club player was registered with last season

ETHNICITY (Please Circle) White Irish Black African Caribbean Black Other Indian Pakistani Bangladeshi Chinese Other

MEDICAL CONDITION .....  
 Please state any known Medical Condition & Emergency Contact Number

SIGNATURE I have witnessed the player's signature and on behalf on the club request you to register him

SECRETARY/CHAIRMAN/MANAGER



Please return:  
 Completed form and 2 passport photos  
 Proof of date of birth, if first registration with the league  
 To appropriate Registration Secretary

OFFICIAL USE

Date registered .....

Proof of birth seen YES - NO



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