

2017-18

CGFL INITIAL TEAM REGISTRATION FORM

PLEASE ENSURE EITHER LAST SEASONS CARD IS ENCLOSED (OR PROOF OF AGE FOR NEW PLAYER) AND MARK WHICH WITH A CROSS (x) NEXT TO THE PLAYERS NAME. PLEASE ENSURE THE PLAYER IS ENTERED CORRECTLY ON FA WGS OR PLAYER &/OR TEAM MAY BE REJECTED.

BLOCK CAPITALS ONLY. Post with proof of ID to: 48 Shelley Avenue, Wincham, Cheshire, CW9 6PH

TEAM NAME		AGE BAND	
CLUB			

PLAYER NAME	OLD ID CARD	PROOF OF AGE	D.O.B
0 ANN EXAMPLE	X		15.02.05
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NOTES TO REGISTRATION SECRETARY:

PLEASE NOTE PLAYER PHOTO ON WHOLE GAME SYSTEM MUST BE NEW PICTURE TAKEN WITHIN THE LAST 6 MONTHS. NO HATS OR HOODS, FULL FACE PHOTO. INCORRECT PHOTO WILL RESULT IN DELAY OF ELIGIBILITY TO PLAY. PLEASE ENSURE IF PLAYER IS OVER 10 YEARS OF AGE THAT THEY ARE NOT SUBJECT TO FIFA INTERNATIONAL CLEARANCE (THIS INCLUDES WALES AND SCOTLAND).