



## PLAYER REGISTRATION

### TEAM DETAILS

Team Name:

League Category:  Under 7  Under 8  Under 9  Under 10  Under 11  Under 12

### PLAYER DETAILS

Child's Name

Parent's Name

Date of Birth          
D D M M Y Y Y Y

E-mail

Address

Phone

Town  Postcode

Emergency Phone

County

#### DECLARATION

Please sign and complete the boxes below to confirm:

You are the parent or legal guardian of the child named above, and that you have read and signed the code of conduct and disclaimer.

\_\_\_\_\_  
Name of Parent

\_\_\_\_\_  
Signed by Parent

\_\_\_\_\_  
Date