



SAFA Durban Central Local Football Association



JUNIOR PLAYER'S INITIAL REGISTRATION 2021

SUBMIT DUPLICATE FORMS, DUPLICATE ID, REG CARD & TRANSFER CERTIFICATE

DIVISION / AGE	U6 2015	U7 2014	U8 2013	U9 2012	U10 2011	U11 2010	U12 2009	U13 2008	U15 2006/7	U17 2004/5	U19 2002/3
STREAM / GROUP	A B C D	A B C D	A B C D	A B C D	A B C D	A B C D	A B C D	A B C D	A B C D	A B C D	A B C D

SURNAME OF PLAYER											
FORENAME OF PLAYER											
IDENTITY NUMBER OF PLAYER											
ADDRESS OF PLAYER											
TELEPHONE NO. OF PLAYER											

PARENTAL CONSENT	I, parent of the aforesaid player, do hereby give consent for my child to be registered for the undermentioned CLUB, and for DCLFA to obtain information regarding my child, and for my child to participate for the CLUB and DCLFA, and absolve SAFA from any injury to my child
SIGNATURE: _____ DATE: / / 2021	

NAME OF SCHOOL														
GRADE OF LEARNER	GRADE:	R	1	2	3	4	5	6	7	8	9	10	11	12
SCHOOL OFFICIAL'S SIGNATURE														
DESIGNATION OF SCHOOL OFFICIAL														

Attach
passport-size photo 1
in colour here
and photo 2 on duplicate
Registration form.
Attach 3rd and 4th photos on
duplicate certified
copies of ID
.....
School stamp here across
photo

NAME OF CLUB	Ballito United Football Club (NPC)										
ADDRESS OF CLUB	Albertina Way, Ashton, Ballito										
TELEPHONE OF CLUB		0	8	3	6	5	4	5	5	6	2
E-MAIL ADDRESS OF CLUB	admin@ballitounitedfc.co.za										
TRANSFER CERTIFICATE	FROM CLUB:							SUBMITTED		NOT SUBMITTED	
CLUB SECRETARY	Nicole Welsh										

COMPULSORY REQUIREMENTS	<ol style="list-style-type: none"> Affix passport size photograph in colour in the space shown above Attach CERTIFIED IDENTITY DOCUMENT to this form Attach Player's Registration Card & TRANSFER CERTIFICATE from other club to this form School details to be completed, with school stamp once across both attached photographs
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