Metro West Junior Football League Inc.
Player Registration Form

Please complete the form using neat **BLOCK** printing with a black or blue pen.

Section A – PLAYERS DETAILS

I apply to register with the **LOCKLEYS FOOTBALL CLUB**

Surname..... First Name.....

Age ..... years (as of 1st January) DOB _ _ / _ _ / _ _ _ _

to play in the U8 (Grasshopper)/U9/U10/U11/U12/U13/U14/U15/U16 competition

St Address..... Suburb..... Post Code .....

Telephone..... Mobile.....

Email .....

PARENTS/GUARDIANS

…… ……
[Surname] [First name] [Surname] [First name]

DISCLAIMER

This information is for use by the League and the nominated club for managing its Junior program.
The information may be supplied to SANFL Clubs for development squad participation.
It will only be provided to other organisations when the League or club is legally required to do so.

Section B – DECLARATIONS

Registration will **not proceed** unless the declaration below has been signed by the Player (if old enough) and Parent/Guardian and a copy of a Proof of Age document is provided.

Please attach a photocopy of one of the following Proof of Age documents:

Birth Certificate/ Passport/ Baptism Certificate/ School Card/ CAFHS or CYH Blue Book, School letter [from Principal on School Letterhead]. The Proof of Age document must include the player's full name and date of birth.

PLAYER: I declare that the above statements to be true and correct, and understand that false information may result in forfeiture of premiership points to my Club.

Signed:……

PARENT/GUARDIAN: I declare that the above statement to be true and correct and support this application.

Signed:…….. Dated _ _ / _ _ /2010

Section C – MWJFL REGISTRAR USE ONLY

MWJFL Registration No…..... Registrar…..…… Dated _ _ / _ _ /2010