

**STROUD & DISTRICT FOOTBALL LEAGUE
REGISTRATION FORM**

This form must be signed by in the presence of a Witness or the Club Secretary.
No Player can sign for more than one Club in the League without first obtaining a transfer.

I, full name (in BLOCK CAPITALS)

Address Post Code

Telephone/Mobile Email

desire to be registered by the Stroud & District Football League as a playing member of
..... A.F.C

Signature of Player D.O.B

Signature of Witness or Secretary Date

In the event of the Club defaulting or failing to meet their obligations to the League, a Player signing this form accepts his share of any liability and renders himself liable to be called upon to meet his obligation as per League Rules.

When duly filled in and SIGNED IN INK, this form must be forwarded to the League Registration Secretary

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