

MIDDLESEX COUNTY FOOTBALL LEAGUE

SATURDAY PLAYER REGISTRATION FORM 2018/19



Please complete all grey boxes on this form in ink and in CAPITAL letters

To be completed by player

| | | | |
|--|-----|----------------|--|
| CLUB NAME | | | |
| PLAYER'S FIRST NAME(S) | | | |
| PLAYER'S SURNAME(S) | | | |
| DATE OF BIRTH | / / | EMAIL ADDRESS | |
| PLAYER'S ADDRESS (including postcode) | | | |
| PREVIOUS CLUBS | | | |
| PLAYER'S SIGNATURE | | | |
| DATE | / / | MOBILE TEL NO: | |

Under GDPR legislation, all applicants must make a simple declaration indicating their agreement that The MCFL may hold information on them that is reasonably needed to administer their membership etc and that this information may be shared with the relevant parent county or FA when dealing with disciplinary matters. This information will be deleted at the end of the forthcoming season. The MCFL may wish to communicate with you in an agreed form. How would you like to receive such information? Please note that without agreeing to this, we will not be able to process your registration.

email post telephone sms/text

To be completed by Club Official

Has the player ever played with a club outside of England? YES /NO

If yes, please include the International Registration Certificate, obtained from The FA

I certify and confirm that I have checked the above details and they are correct. I accept that I am responsible for the accuracy of the details on the player registration form. Where applicable, I have checked with the player's former club that the player has no liabilities owing to them. I confirm that I have checked with the County FA and that the player signed above is eligible to play. As Club Secretary, I confirm that the said player has read the code and the club will ensure, to the best of its ability, that the player abides by the code.

| | |
|---------------------------|--|
| CLUB OFFICIAL'S NAME | |
| POSITION WITHIN CLUB | |
| CLUB OFFICIAL'S SIGNATURE | |
| DATE | |