

CAPE TOWN TYGERBERG F.A.

JUNIOR MEMBERSHIP FORM 2019

Form must be completed in full

Please tick ✓

<u>EXISTING</u>		<u>NEW</u>		<u>TRANSFER</u>	
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Personal Details

Surname:		First name:	
Identity number:		D.O.B:	
Residential address:			
Contact no.	(W)		(Cell)

Club Details

Please tick ✓

Club:	<input type="checkbox"/>	Same club as previous season	<input type="checkbox"/>
SAFA (CT) reg. no:		CTTFA reg. no:	

Previous Club & Association Details

CLUB		YEAR		LFA	
CLUB		YEAR		Association	SAFA (CT)
CLUB		YEAR		Association	SAFA NATIONAL

NB: A clearance certificate duly authorized by the previous club(s) and above mentioned LFA's/Associations, along with CTTFA/SAFA (CT)/SAFA NATIONAL registration card(s) is to be attached to this application for players seeking registration with the club mentioned above.

DISCLAIMER: I the undersigned, in my capacity as Parent/Guardian, understand and agree to follow the principles and procedures embodied in Cape Town Tygerberg Football Association's Constitution and Disciplinary Code of Conduct (a copy of the CTTFA Disciplinary Hand Book can be obtained from your club or CTTFA's website).

Parent/Guardian signature: _____ Print name: _____

We, _____ FC confirm that we wish to register the above-named player as a member of our club and that all information as stated above is correct and has been verified.

Signed (club official): _____ Print name: _____

Date: _____