

Name

Reg. No.

Date

**For Official Use Only**



**KINGSTON & DISTRICT  
FOOTBALL LEAGUE**

AFFILIATED SURREY COUNTY F.A.

**SEASON 20.....**

This for to be completed and signed IN INK.

*I wish to be registered as a player for the undermentioned Football Club in accordance with the rules of the Kingston & District Football League, and I agree to abide by those rules.*

**I certify that I am not registered with the above league for any other Club for the present season.**

*Signature of Player* .....

*Address* .....

*Witness* .....

*Address* .....

*I request that* ..... **be registered as a player**  
*(Player's name in BLOCK CAPITALS)*

*For* ..... **Football Club**

*Date* .....

*Hon. Secretary*



**KINGSTON & DISTRICT FOOTBALL LEAGUE**

Name

Date of birth

Tel. No.

*Previous Club* .....

*Has been registered as a player for* ..... **F.C**

*Under No* ..... **Day 1/ 2/ 3/ Date** .....