Name	Reg. No.	Date

For Official Use Only

KINGSTON & DISTRICT FOOTBALL LEAGUE

AFFLIATED 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*** .....