



## NEW & TRANSFER PLAYER REGISTRATION FORM - AMATEUR PLAYER 2021

Type of Registration (Please Tick) **New**  **Transfer**

SAFA CAPE TOWN REGISTRATION NUMBER ISSUED (Regional Use)

Note: this form must be accompanied by a COPY of the members Computerised Birth Certificate for 16 and younger

Note: this form must be accompanied by a COPY of the members Green Coded RSA Id or Smart Card for 18 and older

Player Type (Please Tick) **Football**  **Futsal**  **Beach Soccer**

Members Type (Please Tick) **Youth**  **Senior**  **Player**  **Referee**  **Official**

Members ID number

Members Surname

Members First Name

Nationality **South African**  **Foreigner**  (Submit the applicable official documentation from Department of Home Affairs or from the Country of Origin)

Gender **Male**  **Female**  **Disabled** **Yes**  **No**

Club Name

Previous Club if Applicable  Clearance Attached (Please tick)

LFA Name

Previous LFA if Applicable  Clearance Counter Signed (Please tick)

LFA Reg Officer Signature  By signing this form, the LFA official confirms that the information herein is true & correct

Date: \_\_\_\_\_/\_\_\_\_\_/2021

**FOR LFA USE ONLY**

### FOR REGIONAL USE ONLY

#### SAFA CT REG OFFICER REJECTION COMMENTS/REASON

Player registered with another club obtain clearance and/ or counter clearance from the LFA

Club & LFA

Date Last Registered \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Provide Updated Photo

Other

Lost Card, provide letter from club (Please Tick if attached)

Player Registration Card (Paste no staples)

Id Size Photo (Paste no staples)