



SAFA Greater Durban Local Football Association



JUNIOR PLAYER'S INITIAL REGISTRATION 2024

SUBMIT DUPLICATE FORMS, DUPLICATE ID, REG CARD & TRANSFER CERTIFICATE

DIVISION / AGE	U6 2018	U7 2017	U8 2016	U9 2015	U10 2014	U11 2013	U12 2012	U13 2011	U15 2009/10	U17 2007/8	U19 2005/6
STREAM / GROUP	A B C D	A B C D	A B C D	A B C D	A B C D	A B C D	A B C D	A B C D	A B C D	A B C D	A B C D

SURNAME OF PLAYER											
FORENAME OF PLAYER											
IDENTITY NUMBER OF PLAYER											
ADDRESS OF PLAYER											
TELEPHONE NO. OF PLAYER											

PARENTAL CONSENT	I, parent of the aforesaid player, do hereby give consent for my child to be registered for the undermentioned CLUB, and for GDLFA to obtain information regarding my child, and for my child to participate for the CLUB and GDLFA, and absolve SAFA from any injury to my child
SIGNATURE: _____	
DATE: / / 2024	

NAME OF SCHOOL														
GRADE OF LEARNER	GRADE:	R	1	2	3	4	5	6	7	8	9	10	11	12
SCHOOL OFFICIAL'S SIGNATURE														
DESIGNATION OF SCHOOL OFFICIAL														

Attach
passport-size photo 1
in colour here
and photo 2 on duplicate
Registration form.
Attach 3rd and 4th photos on
duplicate certified
copies of ID
.....
School stamp here across
photo

NAME OF CLUB												
ADDRESS OF CLUB												
TELEPHONE OF CLUB												
E-MAIL ADDRESS OF CLUB												
TRANSFER CERTIFICATE	FROM CLUB:	SUBMITTED							NOT SUBMITTED			
CLUB SECRETARY												

COMPULSORY REQUIREMENTS	<ol style="list-style-type: none"> Affix passport size photograph in colour in the space shown above Attach CERTIFIED IDENTITY DOCUMENT to this form Attach Player's Registration Card & TRANSFER CERTIFICATE from other club to this form School details to be completed, with school stamp once across both attached photographs
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