

## SAFA Greater Durban Local Football Association



## JUNIOR PLAYER'S INITIAL REGISTRATION 2025

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

DIVISION / AGE	U6	U7	U8	U9	U10	U11	U12	U13	U15	U17	U19
	2019	2018	2017	2016	2015	2014	2013	2012	2010/11	2008/9	2006/7
STREAM / GROUP	ABCD	ABCD	ABCD								

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
SIGNATURE:			information regarding my child, and for my child to participate for the CLUB and GDLFA,
DATE:	/	/ 2025	and absolve SAFA GDLFA from any injury to my child. I have read and understood the
			contents of this form and I warrant that all information provided by me is true and correct.

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 3 <sup>rd</sup> photo on
certified copy of ID or Birth
Certificate which must be
stamped by school

School stamp here across photo

NAME OF CLUB								
ADDRESS OF CLUB								
TELEPHONE OF CLUB								
E-MAIL ADDRESS OF CLUB								
TRANSFER CERTIFICATE	FROM C	LUB:			SUBMITT	ED	NOT SUBMI	TTED
CLUB SECRETARY								

	1. Affix passport size photograph in colour in the space shown above
COMPULSORY	2. Attach CERTIFIED COPY OF IDENTITY DOCUMENT to this form
REQUIREMENTS	3. Attach Player's Registration Card & TRANSFER CERTIFICATE from other club to this form
	4. School details to be completed, with school stamp once across both registration forms and
	I.D. document.