FFV

2010 Amateur Player Registration Form

Players Surname _____ Age Group **U**

(As at 1st Jan2009 eg DOB 1994 = U16)

Players Other Name(s) _____

Date of Birth _____ Country of Birth _____

Current Address _____ Email Address _____

_____

_____ Medical Conditions (Please list any known medical

Phone No. _____ Conditions which may be relevent.) _____

(Must be available on game day for venue changes etc) _____

_____

Previous Club (if applicable) _____ Clearance Required | Yes/No |

_____ FFV Registration # |

FFA Registration # |

Declaration

I (players name) _____ hereby declare that I will fully agree to play under the jurisdiction of the Football Federation Victoria (FFV) incorporated as a registered Amateur player of the **Moreland City JSC** and undertake to obey at all times the Constitution, Rules, and Regulations, and Resolutions and Decisions made by the Football Federation Victoria incorporated its Appeal Board, Tribunials and Disciplinary Committees and Referees. I also undertake on request to made my services as a player available when selected by Football Federation Victoria incorporated for training, preparation and participation for representative games at all levels.

_____

Signature of Player **Date** / / 2009

_____

Signature of Parent or Gardian **Date** / / 2009

Office Use

Registered ***Date*** ***/ /*** ***Receipt***

ID # _____ ***Payment***

(Allocated by FFV) ***Method*** ***Cash / Cheque***

Make Cheques payable to: ***Moreland City Soccer Club Inc***

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