



REGISTRATION No.	DATE/TIME REGISTERED	INITIALS Email/ Post/Hand
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Above three boxes for official use only



**EBAC NORTHERN LEAGUE – NATIONAL LEAGUE SYSTEM
PLAYER’S REGISTRATION FORM**

Season 2017/2018

Full Name of Club _____

Status of Registration* Contract Non-Contract Short Loan Long Loan Scholar/Work Experience

*Delete not applicable

Full Name of Player - Surname _____ Forename(s) _____

Date of Birth _____ Place of Birth _____ Nationality _____

Contact Telephone No. _____ Is this player a goalkeeper? **YES or NO**

Current Postal Address _____

_____ Post code _____ Email: _____

Last Club / Other Clubs this Season: _____

Last Club / Other Clubs last Season: _____

Have you ever registered with a Club outside of England?* **YES / NO** Has an International Clearance Certificate been granted allowing you to play in England?* **YES / NO**

Please list all Clubs & Country played for outside of England?* Clubs _____ Country _____

*You must include Clubs playing in Northern Ireland, Scotland & Wales

In signing this form you are making a declaration that you are not currently registered under written contract with another Club, can you confirm this? YES / NO

Player’s Signature _____ Date _____

I certify that the above information is correct and I consent to the information that I have provided on this form being used by the League for any purposes under the Data Protection Act 1998.

Signature of Witness _____ Name of Witness _____ Date _____
(Please Print)

Address of Witness _____

NB: I confirm I was present when the player signed this form (the above witness can be the same as the Club Official signing this form if they were present)

Signature of Club Official _____ Date _____

I certify that I have checked the eligibility of this player

Address of Club Official _____

Please indicate if this form was sent via email? **YES / NO** If YES, state date and time _____



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PLAYER’S REGISTRATION FORM**

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Clubs must complete Section A before submitting the form

Season 2017/2018

SECTION A

Full Name of Club _____

Full Name of Player _____

SECTION B (for League use only)

Date Registered _____ Time Registered _____ Signed _____

Email/Post/Hand

(Registration Secretary)