

PLAYER REGISTRATION FORM

This Form is to be completed in full and submitted with the supporting documents required for processing.

Registering Club	City	SUNIZISE	
	,		

Player Information	n sala a sala sala sala sala sala sala s	The state of the s
Name	MASIBULEIE	
Surname	MACIBI	
ID Number	090509	6289 087

Residential Information			E CONTRACTOR ASS	
Address	28	HIGHWAY AKHANE INSBANI	STREET	
	MASAHHANE			
	CTANSBAAI			
	ma	7220		
Contact Information				
Contact Number (Cell):				
E-mail:				

Declaration

I hereby declare that I will adhere to the Community Football Federation Competition Rules as required in my participation in all its competitions. I will behave myself accordingly and show myself to be a good example to those in my community and consider myself an ambassador for the Federation.

Date: 23/03/2024

<i>;</i>	OR OFFICIAL PURPO	OSES ONLY
Unique Player Number	er:	p.*
ID Photo (clear & recent)	ID Copy (clear)	Transfer/ Clearance Certificate



home affairs

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Home Affairs
REPUBLIC OF SOUTH AFRICABRIDGED

PARTICULARS FROM THE POPULATION REGISTER LANDE

CHILD'S ID NO:

Department:

090509 6289 08 7

SURNAME:

MACIBI

FIRST NAMES:

MASIBULELE

DATE OF BIRTH:

2009-05-09

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MALE

COUNTRY OF BIRTH:

SOUTH AFRICA

MOTHER'S ID NO:

871012 1259 08 5

SURNAME:

MACIBI

FIRST NAMES:

CHWAYITA

DATE OF ISSUE: 2017-04-24

15SUED BY: YOWZO2

DIRECTOR-GENERAL: HOME AFFAIRS



