

## **PLAYER REGISTRATION FORM**

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

Registering Club	City Sunn	ise sie
Player Information		
Name	Anath: Mibhen	
Surname	Mibhem	1
ID Number	State	
Residential Informati	00	
Address	Tambo Street	
Address	Masakhane	
	Gansteri	
	7220	
Contact Information		
Contact Number (Ce	11): 07/ 755 8943	
E-mail:		
Declaration		· · · · · · · · · · · · · · · · · · ·
my participation in all its com		deration Competition Rules as required in rdingly and show myself to be a good assador for the Federation.
Signature:	\$	
Date:	23/08/2024	
	6	
	FOR OFFICIAL PURPOS	SES ONLY
Unique Player Numb	· · · · · · · · · · · · · · · · · · ·	SES ONLY



## REPUBLIC OF SOUTH AFRICA

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28 JUN 2001

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