



# PLAYER REGISTRATION FORM

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

Registering Club: **JENDE Cosmos**

Player Information	
Name	LWANDO
Surname	LODEWYK
ID Number	0409126076 085

Residential Information	
Address	SIMUNYU
	BREIDSDORP
	7280

Contact Information	
Contact Number (Cell):	0744 861320
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.

Signature:	<i>L. Lodewyk</i>
Date:	

## FOR OFFICIAL PURPOSES ONLY

Unique Player Number:	
ID Photo (clear & recent)	ID Copy (clear)
Transfer/ Clearance Certificate	



REPUBLIC OF SOUTH AFRICA  
NATIONAL IDENTITY CARD

Surname:  
**LODEWYK**  
Names:  
**LWANDO**  
Sex:  
**M**  
Nationality:  
**RSA**  
Identity Number:  
**0409126076085**  
Date of Birth:  
**12 SEP 2004**  
Country of Birth:  
**RSA**  
Status:  
**CITIZEN**



Signature:



Conditions:

This card has been issued by the  
Department of Home Affairs in terms of the  
Identification Act, Act 68 of 1997

If found please return to the Department of Home Affairs  
For enquiry or verification purposes contact 0800 60 11 90

Date of Issue:  
**29 NOV 2020**



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