



PLAYER REGISTRATION FORM

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

Registering Club	MORNING STARS
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Player Information	
Name	JAMKELA THOKOZANI
Surname	MQINA
ID Number	940812 55 89 081

Residential Information	
Address	6123 Jaya Street Mogalehane Gankbaai
Contact Information	
Contact Number (Cell):	071 7140018
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>[Handwritten Signature]</i>
Date:	20/08/2024

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

I.D. No. 940812 5529 02 1



S. A. BINGWA/S. A. CITIZEN

ORIGIN

MOINA

ORIGIN

YANKELA THOKOZANI

REPUBLIC OF SOUTH AFRICA
DISTRICT OF FREE STATE

SOUTH AFRICA

DATE OF BIRTH

1994-08-12



ISSUE DATE

2009-09-29

ISSUED BY AUTHORITY OF THE
DIRECTOR GENERAL
HOME AFFAIRS

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Handwritten notes in the middle left section, possibly a date and name.

Handwritten notes in the bottom left section, including a signature.

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SUID-AFRIKAANSE POLISIEDIENS

KLIENTE DIENS SENTRUM
HERMANS

2023-04-16

HERMANS
CLIENT SERVICE CENTRE

SOUTH AFRICAN POLICE SERVICE