

PLAYER REGISTRATION FORM

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

Registering Club	MORNING STA	irs
Player Information		
Name	SIJASAMKELA	
Surname	MEUMLA	
ID Number	040509508408	4
Residential Informa	tion	
Address	6123	
	Jana Street	
	Mesekuare	
	Gaustaas	
Contact Information		
Contact Number (C	ell): 07/7/400/8	
E-mail:		
Declaration		
my participation in all its con example to those in my con	mpetitions. I will behave myself	nall Federation Competition Rules as required in faccordingly and show myself to be a good nambassador for the Federation.
Signature:	10/08/2024	
	CONTRACTOR A	
Date:	20/08/2024	
Date:		
Date:	FOR OFFICIAL PUR	POSES ONLY
Date: Unique Player Num	FOR OFFICIAL PUR	POSES ONLY



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REPUBLIC OF SOUTH AFRICA NATIONAL IDENTITY CARD

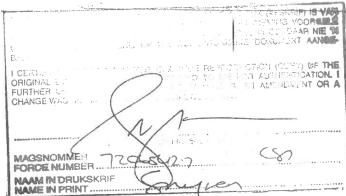
Surname:
NGUMLA
Names:
SIYASAMKELA
Sex:
M
Nationality:
RSA

Identity Number: 0405095084084
Date of Birth, 09 MAY 2004
Country of Birth, RSA
Status, CITIZEN









2024 - C7- C 5

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:

20 MAR 2021

