



PLAYER REGISTRATION FORM

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

Registering Club		Mokulisy Stars
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Player Information	
Name	MUHAMMAD
Surname	GRANDJO
ID Number	970405 5656 084

Residential Information	
Address	6123 Yane Street Marsheane Members
Contact Information	
Contact Number (Cell):	0717140015
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	

ISSUED BY AUTHORITY OF
THE DIRECTOR-GENERAL
HOME AFFAIRS

DATE ISSUED
2014-07-09



DATE OF BIRTH
1997-04-05

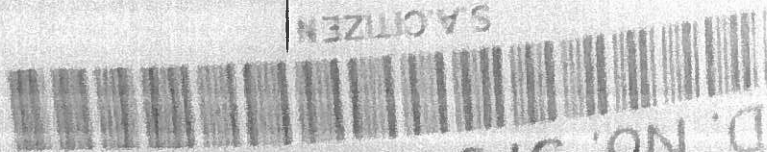
COUNTRY OF BIRTH
SOUTH AFRICA

FORENAMES
LUYANDA



SURNAME
GOONONO

S.A. CITIZEN



I.D. No. 970405 5656 084

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