



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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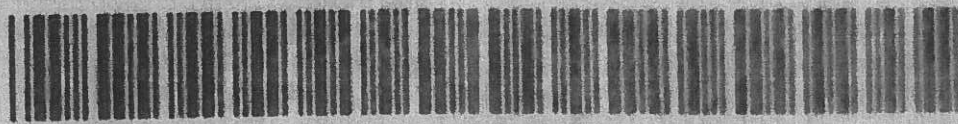
Player Information	
Name	SABELO PANUELL
Surname	HLELA
ID Number	0111 20 61 08 081

Residential Information	
Address	6123 Jana Street Masakhane Gansbaai
Contact Information	
Contact Number (Cell):	07171 40018
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:	
Date:	20/08/2024

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

I.D. No. 011120 6108 081



S.A.CITIZEN

SURNAME

HLELA

FORENAMES

SABELO PANUELL

COUNTRY OF BIRTH

SOUTH AFRICA

DATE OF BIRTH

2001-11-20



DATE ISSUED

2019-02-13

ISSUED BY AUTHORITY OF
THE DIRECTOR-GENERAL
HOME AFFAIRS