



PLAYER REGISTRATION FORM

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

| | |
|------------------|------------|
| Registering Club | Express FC |
|------------------|------------|

| Player Information | |
|--------------------|-----------------|
| Name | AKHONA |
| Surname | OHIPANI |
| ID Number | 930708 5980 084 |

| Residential Information | |
|-------------------------|---|
| Address | 15 Walter Sisulu Street Masa Kumbi Gansbaai 7220 |

| Contact Information | |
|------------------------|-----|
| Contact Number (Cell): | N/A |
| 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: | 14-02-2024 |

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

GEREGISTREERDE WOON- EN POSADRES

1. Bewaar die bewys van u GEREGISTREERDE WOON- EN POSADRES in hierdie sakkie.

2. Indien u van adres verander het, of indien besonderhede van u huidige adres, bv. straatnaam en/of -nommer, ens. verander het, moet die vorm KENNISGEWING VAN ADRESVERANDERING, wat in die sakkie agter in die identiteitsdokument is, gebruik word om die verandering aan te meld en moet dit ingedien word by of gepos word aan die naaste streek-/distrikkantoor van die DEPARTEMENT VAN BINNELANDSE SAKE.

REGISTERED RESIDENTIAL AND POSTAL ADDRESS

1. Keep the proof of your REGISTERED RESIDENTIAL AND POSTAL ADDRESS in this pocket.

2. If you have changed your address, or, if particulars of your present address, e.g. name of street and/or street number, etc., have been changed, the NOTICE OF CHANGE OF ADDRESS form in the pocket at the back of the identity document must be used to report the change and it must be handed in at or posted to the nearest regional/district office of the DEPARTMENT OF HOME AFFAIRS.

1
I.D.No. 930708 5980 08 4



S. A. BURGER/S. A. CITIZEN

VAN/SURNAME
OLIPHANT

VOORNAME/FORENAMES
AKHONA

GEBORTEDISTRIK OF LAND/
DISTRICT OR COUNTRY OF BIRTH
SOUTH AFRICA

GEBORTE DATUM/
DATE OF BIRTH

1993-07-08

DATUM UITGEREIK
DATE ISSUED

2009-05-25



UITGEREIK OP GESAG VAN DIE
DIREKTEUR-GENERAAL:
BINNELANDSE SAKE

ISSUED BY AUTHORITY OF THE
DIRECTOR-GENERAL:
HOME AFFAIRS

EK SERTIFISEER DAT HIERDIE DOKUMENT 'N WARE AFDRUK (AFSKRIF) IS VAN DIE OORSPRONKLIKE DOKUMENT WAT AAN MY VIR WAARNEMING VOORGELEë IS. EK SERTIFISEER VERDER DAT, VOLGENS MY WAARNEMINGS, DAAR NIE 'N WYSIGING OF VERANDERING OP DIE OORSPRONKLIKE DOKUMENT AANGEBRING IS NIE.

I CERTIFY THAT THIS DOCUMENT IS A TRUE REPRODUCTION (COPY) OF THE ORIGINAL DOCUMENT WHICH WAS HANDED TO ME FOR AUTHENTICATION. I FURTHER CERTIFY THAT, FROM MY OBSERVATIONS, AN AMENDMENT OR A CHANGE WAS NOT MADE TO THE ORIGINAL DOCUMENT.

HANDTEKENING/SIGNATURE

MAGSNOMMER
FORCE NUMBER

RANG
RANK

NAAM IN DRUKSKRIF
NAME IN PRINT

M. S. P. Desemela
703149A-2 SGT
M.S.P. Desemela

SUID AFRIKAANSE POLISIEDIENS
STASIEKOMMISSARIS
AANGEWES BEAMPTIE
07-02-2022
STATION COMMISSIONER DEPUTED OFFICIAL
SUID AFRIKAANSE POLISIEDIENS
SOUTH AFRICAN POLICE SERVICE