



PLAYER REGISTRATION FORM

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

Registering Club	MARINE UNITED FC
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Player Information	
Name	SHERIF
Surname	MWALE
ID Number	02-08-1995

Residential Information	
Address	NEW REST 117 MASACHANE CIANSBAAI T220

Contact Information	
Contact Number (Cell):	
E-mail:	nhinzic9sive@gmail.com

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:	27.06.2024

FOR OFFICIAL PURPOSES ONLY			
Unique Player Number:	5		
ID Photo (clear & recent)	ID Copy (clear)	Transfer/ Clearance Certificate	

