

Durham County FA U17's League

PLAYER REGISTRATION FORM



TO BE COMPLETED BY THE PLAYER:

I declare that I wish to be registered for *(Team Name)*
as a player in the Durham County U17's Saturday League for the 2019/2020 season.

Player's Full Name:
(In block capitals)

Address:
.....

Postcode:

Date of Birth:

Player's Signature

Emergency Contact Number

Digital Photograph to be
emailed to
Mark.Smith@DurhamFA.com

Parent/Carer's Name and Signature:

.....
*I agree to their photograph being displayed on <https://wholegame.thefa.com> and understand that only the Club
they are registered with will be able to view their details online.*

TO BE COMPLETED BY THE TEAM/CLUB SECRETARY:

I declare that the above details are correct and wish the above mentioned player to be registered with the

Durham County U17's Saturday League as a player for *(Team Name)*.....

Secretary's Signature Date

On the day registration – opponents signature Club Name.....

League Privacy Notice:

Why we need your personal data: This is to register you for the above team within the league and to ensure you are eligible to play within the League. This form will be destroyed once your data has been entered on to the League administration system.

Who we share your personal data with: Your data will be entered onto the FA Whole Game System for administration purposes only.

How long we hold your personal data: We keep your personal data for as long as you are registered with the League.