



PLAYING FOOTBALL WITH A PROSTHESIS

COUNTY FA APPLICATION FORM

PLAYING FOOTBALL WITH A PROSTHESIS FA COUNTY APPLICATION FORM

COUNTY ASSOCIATION NAME (CFA) _____

CFA POINT OF CONTACT _____

NAME OF PARTICIPANT _____

YOUTH

ADULT

NAME OF CLUB _____

NAME OF LEAGUE _____

Please ensure you provide an **original letter** from a rehabilitation specialist or specialist prosthetist confirming that the applicant's participation in football using the prosthesis does not pose a risk to the player wearing the prosthesis. This should include **full technical details of the prosthesis** along with current detailed photographs and or video footage if necessary.

Applications can be emailed to the FA Senior Inclusion & Diversity Manager equality@thefa.com or sent to The FA Group, Wembley Stadium, PO Box 1966, London, SW1P 9EQ