



SSFL - 002



PLAYERS REGISTRATION FORM Boys Girls

to be completed in triplicate

The following bona-fide students of _____ School are requesting registration as players in the 2023 season of the _____ Zone of the Secondary Schools Football League. I hereby verify that the information given is correct and in accordance with the Rules & Regulations of the Ministry of Education.

NO.	NAME OF STUDENT	D.O.B YY/MM/DD	STATUS OF LAST SCHOOL			AUTHORITY	S.E.A YEAR
			Form	SCHOOL	YEAR		
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

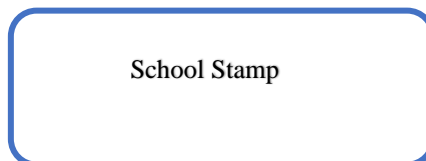
FOR THE PRINCIPAL:

I am satisfied that the above-named players are full time students of this institution and that he/she is not registered with or participating in any other full time educational program. I wish to indicate by affixing my signature to this registration form, that the information given above is true

PRINCIPAL NAME (in block)

PRINCIPAL SIGNATURE

DATE: _____



RECEIVED BY

DATE/TIME