



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 2025 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.

Table with 8 columns: NO., NAME OF STUDENT, D.O.B YY/MM/DD, Form, STATUS OF LAST SCHOOL (SCHOOL, YEAR), AUTHORITY, S.E.A YEAR. Rows 1-20.

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

DATE



RECEIVED BY

DATE/TIME