

REGISTRATION FORM (CATEGORY 3) PLAYERS SEASON 2017

THIS FORM MUST BE COMPLETED BY THE PLAYER CONCERNED IN HIS / HER OWN HANDWRITING AND BE DATED AND SIGNED WITH HIS / HER NORMAL SIGNATURE. AFTER THE PLAYER HAS COMPLETED HIS / HER PART. THE CLUB SECRETARY, REGISTRATION SECRETARY OR CHAIRMAN SHOULD THEN COUNTERSIGN THE FORM, DATE IT AND SEND IT - TOGETHER WITH THE APPROPRIATE FEE - TO THE ADDRESS SHOWN BELOW.

(Please complete all sections. Failure to do so may result in a player not being eligible to play)

NAME OF CLUB BUCKINGHAM TOWN CC

FIRST NAME(S) KALLAN SURNAME BRAID-BALL

ADDRESS (IN UK) 124 BURLINGHAM PIECE
BUCKINGHAM

POST CODE MK18 7HU


DATE OF BIRTH 24/9/95 COUNTRY OF BIRTH AUSTRALIA


PASSPORT NUMBER PA5384864 COUNTRY & DATE OF ISSUE AUS 1-2-17

DATE ENTERED UK 12-4-17 TYPE AND NUMBER OF VISA D-TIER5 395831

CRB REG.NO. (Cat 3 players) 74303 PLACE & DATE OF ISSUE AUS 10-2-17

I confirm that I will at all times abide by the Cherwell League Rules and Code of Conduct for Member clubs.

SIGNATURE OF PLAYER  DATE 29-3-17

SIGNATURE OF CLUB OFFICER  DATE 29-3-17

The Cherwell Cricket League will NOT divulge ANY addresses to any third party without the consent of the signatory.

Please scan/post or return by hand or email to:-

Gary Murton
The Old Post
Oxford Road
Stokenchurch
Bucks
HP14 3SX
gary@theoldpost.com

For official use only Date eligible to play