



## REGISTRATION FORM CATEGORY 3E 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 ABINGDON VALE CRICKET CLUB

FIRST NAME(S) MOHAN KUNAR SURNAME SUBASH CHANDRA BOSE

ADDRESS 6, LEE CLOSE  
KIDLINGTON  
OXFORD POST CODE OX5 2XZ

DATE OF BIRTH 21-SEP-1987 COUNTRY OF BIRTH INDIA

DATE ENTERED UK 14-NOV-2014 TYPE AND NUMBER OF VISA ICT 010691283

PASSPORT NUMBER G9931213 COUNTRY & DATE OF ISSUE INDIA 07-NOV-14

1. I confirm that I reside permanently at the address shown above and that this is my main residence.
2. 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 04-MAY-17

SIGNATURE OF CLUB OFFICER \_\_\_\_\_ DATE \_\_\_\_\_

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