

MEDWAY NEWS YOUTH LEAGUE



DEREGISTRATION FORM

ALL SECTIONS TO BE COMPLETED

NAME OF CLUB -----
K.C.F.A REGISTRATION CODE & No -----
NAME OF PLAYER -----
ADDRESS -----

PLAYER'S AGE GROUP -----

PLAYER'S REGISTRATION No -----
PLAYER'S SIGNATURE -----

----- DATE -----
PLAYER'S PARENT / GUARDIAN'S SIGNATURE -----

----- DATE -----

REASON FOR DE-REGISTRATION -----

(If more space is required please use reverse of this form.)

CLUB SECRETARY'S SIGNATURE -----

----- DATE -----
REGISTRATION SECRETARY'S SIGNATURE -----

----- DATE -----
(THE COUNTERFOIL WILL BE REPLACED PROVIDED A S.A.E IS ENCLOSED)

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