

SOUTH NORTHANTS CRICKET LEAGUE

No.#

PLAYER REGISTRATION FORM

NAME OF CLUB _____

Full Name of Player: _____

Current Postal Address _____
_____ Postcode _____

Date of Birth _____

Last Club / Other Clubs this Season _____

Has the player ever been registered for, or played for another Club in the South Northants Cricket League **YES / NO**

If "Yes", which Club _____

If "Yes", did / does the player obtain / require a transfer of his registration **YES / NO**

Player's Signature _____ Date _____

Signature of Club Official _____ Date _____
(Preferably the Secretary)

Name of Club Official _____

If this form has been emailed, please indicate date & time _____

The original form must be forwarded to the League Secretary within 5 days of the date the form was originally submitted to the League.

A registration number will be allocated when the player is cleared to play for the Club
