



PLAYER REGISTRATION FORM
SportsReach League 2019-20

Team

Full Name

Address

.....

Post Code

Email

Tel/Mobile No:

Date of Birth/...../.....

I accept that SportsReach are **not** responsible for any injury or loss/damage of property caused during or after any SportsReach League activity. SportsReach recommend that players get their own personal accident insurance in case of injury.

For insurance purposes, SportsReach will keep all signing on forms for 7 years or until said player is 25 years of age (If they are under 18). We will not pass or sell your details onto any third party.

I confirm that I am 16 years of age or above at the time of first playing for the above team.

I will refrain from swearing during SportsReach League activities.

I agree that if I wish to transfer within or in/out of the League I must conform to the transfer rules in the constitution. (Managers have copies of the constitution).

I accept that failure to adhere to the above rules could result in disciplinary action by the League.

Signed (Player).....

(If player is under 18yrs, please get parent / Guardian to countersign)

Signed (Manager).....

Date/...../.....

SportsReach - Registered Charity: 1065723



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SportsReach League 2019-20

Player's Copy of Agreement

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- For insurance purposes, SportsReach will keep all signing on forms for 7 years or until said player is 25 years of age (If they are under 18). We will not pass or sell your details onto any third party.
- I agree that if I wish to transfer within or in/out of the SportsReach League I must conform to the transfer rules in the constitution. (Managers have copies of the constitution).
- **I accept that failure to adhere to the above rules could result in disciplinary action by the SportsReach League.**

Signed (Player).....

Signed (Manager).....

Date/...../.....

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