



# BIRCH ACRES FOOTBALL CLUB Est. 1984

Kransduif Street, Birch Acres

P.O. Box 17171, Norkem Park, 1618

BAFCREG2016@gmail.com

## Junior Registration Form

### For Office use only

Birth Year \_\_\_\_\_ Age Group \_\_\_\_\_

Card number \_\_\_\_\_ Coach \_\_\_\_\_

Payment received	1) _____	2) _____	3) _____	4) _____
Invoice numbers	_____	_____	_____	_____
Received by	_____	_____	_____	_____
Handed to Treasurer	_____	_____	_____	_____

Clearance Yes ☐ No ☐ Clearance required from \_\_\_\_\_

Outstanding fees \_\_\_\_\_

### Player Details

Players Full Name	_____	Date of Birth	_____
Identity number	_____	Grade	_____
School	_____	Previous Club	_____
Street Address	_____	Suburb	_____
Med Aid	_____	Med Aid Contact no	_____

### Parent/Guardian Details

<b>Mothers</b> Full Name	_____	I.D. No	_____
Work Number	_____	Home Number	_____
Mobile Number	_____	Email Address	_____
<b>Fathers</b> Full Name	_____	I.D. No	_____
Work Number	_____	Home Number	_____
Mobile Number	_____	Email Address	_____

### In case of emergency please contact my next of kin

Contact name	_____	Relation	_____
Contact number	_____	Alt Number	_____

**Kindly note by registering to play for BAFC, you are bound to remain at the club for the entire season, clearance will be given to players or parents for the registered season.**

### Indemnity Form

I, the undersigned, agree that neither the South African Football Association, ELFA or Members/assistants/etc of BIRCH ACRES FOOTBALL CLUB(BAFC), coaches, referees or their affiliates will not be under any liability to me in respect of any loss, damage, personal injury, delay or expense suffered or incurred by me or my child or any other family member, acquaintance, etc resulting from any act or omission by any carrier and/or third party and any member/assistants/etc of B.A.F.C. or any other party whilst engaging in any activity relating to football including but not exclusive of transportation to and from any practices or games.

The Birch Acres Football Club do not accept any responsibility for any loss, injury or damage that the person or property of myself and/or family and/or any other party may sustain whilst engaged in any soccer activities and I waive any right that I and/or family may have to claim compensation against Birch Acres Football Club, South African Football Association or any members/assistants/etc in respect of the above how so ever arising and whether as a result of negligence or otherwise and I indemnify them against all claims. **By signing this Indemnity Form, i also fully acknowledge understanding and abiding by the rules of BAFC and E.L.F.A.**

Parent's/Guardian's  
Signature \_\_\_\_\_ Parents full Name \_\_\_\_\_ Date \_\_\_\_\_ 15-A

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**no**

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