CAPE TOWN TYGERBERG F.A.

SENIOR MEMBERSHIP FORM 2019

Form must be completed in full

						<u>Pleas</u>	se tick ✓	
<u>EXISTING</u>		<u>NEW</u>			TR	ANSFER		
Personal Details								
Surname:				First name:				
Identity number:			D.O.B:					
Residential address:				7.D.				
Residential address.								
Contact no. (W) (Cell)								
Club Details								
				 "				
			I			'	se tick ✓	
Club:			Same club as previous season					
SAFA (CT) reg. no:				CTTFA reg. no:				
Previous Club & Association Details								
CLUB		YEAR		LF/	\			
CLUB		YEAR		Ass	ociation	SAFA (CT)		
CLUB		YEAR		Ass	ociation	SAFA NATION	AL	
NB: A clearance certificate duly authorized by the previous club(s) and above mentioned								
LFA's/Associations, along with CTTFA/SAFA (CT)/SAFA NATIONAL registration card(s) is to be								
attached to this application for players seeking registration with the club mentioned above.								
DISCLAIMER: I the undersigned, in my capacity as player and or member, understand and agree to								
follow the principles and procedures embodied in Cape Town Tygerberg Football Association's								
Constitution and Disciplinary Code of Conduct (a copy of the CTTFA Disciplinary Hand Book can be								
obtained from you	r club or C	TTFA's website).						
Player signature:			Print name:					
I hereby confirm that the particulars stated above are true and correct. I also confirm that I'm NOT								
registered with an	y other clu	b or association.						
We,	MEADOW	/RIDGE	AF	C confirm	that we w	ish to register the	e above-	
-named player as a member of our club and that all information as stated above is correct and has								
been verified.								
Signed (slub official):				Print name				
Signed (club official):			Print name:					