



ASHESI FOOTBALL ASSOCIATION

PLAYER CONTRACT FORM

2023/ 2024 Season

Name: _____ Age: _____

Nationality: _____ Height: _____ Weight: _____

Year Group: _____

Team: _____ Position: _____

Contract Duration: One (1) Semester

I _____, have read the **AFA constitution** and **agree** to abide by the rules and regulations governing the football as stated in the AFA constitution and will appear before the disciplinary committee upon **flouting** any of the rules and regulations.

Player Signature

Coach Signature

AFA President Signature

Date: / /

Date: / /

Date: / /