

## **Southside Soccer Studs Inc**

Photograph

Signature

Incorporation number: IA59554

EMAIL: southsidesoccerstuds@outlook.com

FACEBOOK: https://www.facebook.com/southsidesoccerstuds

## Membership Form

1. Personal Part	iculars		Here
Name:		_	
Date of Birth:		_	
Nationality:	Occupation:		
Email address:		_	
Residence Address:			
Parent/Guardian (Nan	ne and Number):		
Emergency contact (N	ame and Number):		
2. Football Part	iculars		
Playing position:			
Height (Cm):	Weight (Kg):		
Jersey size:			
3. Medical Deta	ils		
History of Medical Illn	ess (if any):		
Any known congenita	l deformity:		
	Allergies:		
Declaration			
I	hereby certify that I am above 18	years of age an	d the above
information is auther may not have a public and other activities p	ntic and true to the best of my knowledge. I I liability insurance and I am fully aware of romoted by the club. I also agree to adhere the objects and will act in utmost good fait	I understand th the risks associ with all the clu	at the club may or ated with the sports
Date			