



PLAYER REGISTRATION FORM

LEAGUE (please tick): **MEN'S** **WOMEN'S** **JUNIOR (Under 16)**

TEAM NAME: _____

Player Information Required (Complete ALL sections):

First name: _____ **Surname:** _____

Title: Mr/Mrs/Miss/Ms/other (please circle) **D.O.B:** _____

Address: _____

Post code: _____ **Contact number:** _____

Email address: _____

I have read and understand the Leigh Sports Village Small Sided Football Rules of Play. I agree to abide by these rules and I understand that if I do not do so Leigh Sports Village Company have the right to disallow me from participating in the LSV Football Leagues, and any other leagues and events.

N.B. Offences that carry a suspension of 35 days or more will be dealt with by the Lancashire F A.

A copy of the Leigh Sports Village Small Sided Football Rules of Play has been sent to the captain/secretary of each team. Copies are also available at The Pavilion Reception, Leigh Sports Village Company, Tel: 01942 511497.

Signed (by player): _____ **Date:** _____

If you wish to receive further information on future leagues, promotional offers and events at Leigh Sports Village please tick here