

2024 -2025 MANDATORY REGISTRATION FORM



Player full name:	
Player nationality:	Player date of birth:
Player telephone no:	Player house location/address:
Parents / Guardians / Other Responsible Adults	
Name(s) Relationship	Mobile Tel
1)	
2)	
3)	
*Email addresses for team updates (list as many as needed including player's)	
School currently attended & grade:	
Family doctor or clinic (name and phone no.):	
Any illness, medications or allergies?	
Medical insurance carrier and policy no, if any.	
EVERY PLAYER must sent CURRENT IMAGES of:	
(1) Player's face (ok to take picture with cell phone against a white wall)(2) ID document such as a passport or birth certificate	
Send via WhatsApp PM to +1-242-357-92	263.
Players are to provide their own solid black athletic shorts, by the Club.	shin pads, and cleats. Training tops and match uniforms are provide
We posts training and competition updates in our WhatsApp groups. Please make sure <u>you are in the right group</u> to receive timely info, and get in touch if your information changes.	
an inherent risk factor, and therefore the Western	ome environment, please be aware that all sports activities care Warriors Football Club's coaches, managers, administrator accept NO LIABILITY FOR ANY INJURIES, DEATH, LOSse for our players.
By signing below, I provide permission for my child to participate in the 2024-2025 youth football program with Western Warriors FC, and furthermore acknowledge the risks involved with participating in training, matches and riding the team bus (if applicable), and hereby waive any claims whatsoever against the Club and its coaches, managers, administrators, sponsors, drivers, volunteers and other players.	
(name of parent or guardian) (sign	nature of parent or guardian) (date)