

Turkish Community Football Federation (TCFF)

Registration Form

LICENSE No.		PHOTO
NAME ADI:		
SURNAME SOYADI:		
DATE OF BIRTH DOGUM TARİHİ:		
ADDRESS:		

TEAM PLAYED FOR LAST EN SON OYNADIGI TAKIM:	
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I HEREBY DECLARE MY INTENTION TO BECOME A PLAYING MEMBER OF

	FOOTBALL CLUB
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AGREE TO ABIDE BY THE RULES OF THE TCFF

I CERTIFY THAT I AM UNDER OBLIGATION TO THIS CLUB

PLAYER'S SIGNATURE Oyuncunun İmzası		Date	
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CLUB SECRETARY'S NAME			
CLUB SECRETARY SIGNATURE		Date	

REGISTRATION SECRETARY SIGNATURE		Date	
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