

# N.Y.D.O. YOUTH PLAYERS REGISTRATION FORM

With the exception of signature PLEASE COMPLETE IN BLOCK CAPITALS  
All personal details will be treated in confidence

SEASON: 2021 / 2022

COUNTY REPRESENTED: ..... AGE AT 1<sup>ST</sup> SEPT 2021 .....

**PLAYERS DETAILS** (Please tick as appropriate) MALE  FEMALE  DATE OF BIRTH

CHRISTIAN NAME(S): ..... SURNAME: .....

FULL POSTAL ADDRESS: .....

..... POSTCODE: .....

TELEPHONE NO: (INC STD CODE): ..... CHEST SIZE: .....

NATIONALITY - ENGLAND, SCOTLAND, WALES ETC.

Signed:.....

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