This form must be completed in BLOCK CAPITAL LETTERS

THE GUILDFORD & WOKING ALLIANCE FOOTBALL LEAGUE OFFLINE INDIVIDUAL PLAYER CONSENT FORM 2018-19



| NAME OF CLUB | | | O PALL LEADS |
|---|--|--|----------------|
| Full details of person wishing to re FORENAME(S) | gister as a player for the above club | SURNAME | |
| DATE OF BIRTH | (dd/mm/yyyy) | FA Number (FAN) | |
| I have <u>NOT</u> consented to register f I confirm that the above informatic General Data Protection Regulatio | member of the above club for season 20 or any other club in this League for season is correct and consent to the informatin (GDPR) (EU) 2016/679. regulations set out by the League and to | on 2018-19. ion I have provided to be used by | |
| PLAYER'S SIGNATURE | | SIGNATURE OF CLUB SEC | CRETARY |
| DATE | (dd/mm/yyyy) | DATE | (dd/mm/yyyy) |
| LEAGUE PLAYER REGISTRATION | IUST ENSURE THE PLAYER HAS EITH N REGULATIONS BEFORE SIGNING TI MPLETED FORMS MUST BE SCAN | HIS FORM (Rule 8, of the Leag | gue Handbook). |

gwaflregsec@gmail.com

This form is a legal document and any breach of the regulations regarding the registration of players may incur a fine and/or refusal/withdrawal/suspension/cancellation of any player's registration.

PLEASE NOTE:- All personal information recorded on this form will stored on The FA's Whole Game System that meets the requirements on information security as needed for GDPR compliancy.