

# APPLICATION FOR ENTRY TO THE WALLASEY JUNIOR FOOTBALL LEAGUE FOR SEASON 2025/2026

Please use block capitals to complete form

**9 v 9 Section** ..... F.C. (Block Capitals)

wish to provisionally apply for the following teams to compete in the Wallasey Junior Football League for Season 2025/2026

Secretary's Name..... Signature.....

Address.....

Post Code..... Tel No: (Home)..... (Mobile).....

Email address.....

Club Welfare Officers Name..... Signature .....

| Age Group | Team Name | Colours | Ground (If LA please state ground you will apply for) | Manager's Name & Assistant Manager's Name | Home Telephone Number | Mobile Telephone Number | Does this person have a DBS, Child Safeguarding, & FA First Aid |
|-----------|-----------|---------|---|---|-----------------------|-------------------------|---|
|           |           |         |   |   |                       |                         |   |
|           |           |         |   |   |                       |                         |   |
|           |           |         |   |   |                       |                         |   |
|           |           |         |   |   |                       |                         |   |
|           |           |         |   |   |                       |                         |   |
|           |           |         |   |   |                       |                         |   |
|           |           |         |   |   |                       |                         |   |
|           |           |         |   |   |                       |                         |   |
|           |           |         |   |   |                       |                         |   |
|           |           |         |   |   |                       |                         |   |

**PLEASE COMPLETE AND RETURN THIS FORM TO THE LEAGUE SECRETARY**