SOUTHERN ELECTRIC PREMIER CRICKET LEAGUE CATEGORY 1 PLAYER REGISTRATION for 2010	
Name of Club:	CRICKET CLUB / DIVISION :
Player's Details:	
Surname:	First Name:
UK Address:-	
Post Code:	Tel. No:
Country of Birth:	Date of Birth:
N.B. Enter your specific Count	ry of Birth - United Kingdom is not classified as a Country
If born outside the England, Wal following:-	es, Scotland, The Channel Isles or Isle of Man complete the
Passport number:	Issuing Government:
	ualification claimed? (note: valid passports do not automatically
confer citizenship): (see Admin R	?ule 4.4.1)
Previous UK Club	Cricket Club. Season (s):
the ECB Code of Conduct. I confirm disciplinary actions resulting from breathe ECB. I understand that the informate made available to other cricketing Southern Premier Cricket League, the	b abide by the ECB Regulations on player eligibility and qualification criteria and that I am qualified to play for England under these Regulations. I accept that ches of the Code of Conduct will apply to all cricket played under the auspices of tion supplied by me may be held electronically for registration purposes and may bodies. I declare that I have not played in League or Cup competitions in the Hampshire Cricket League, any ECB accredited Premier League nor a National I registered with any other Club in the Southern Premier League or any other
	Data
Player's signature:  I confirm that this player is a FULLY PA	Date: AID UP MEMBER of the above named Club and complies with Administration
	Il be made to this player for representing the above named Club
Club Secretary's signature:	Date:
NB.—This player may not play for the received from the League Registrat	ne above Club until confirmation of his player registration number is ion Secretary. <b>BUT IN AN EMERGENCY:</b> - of the match he wishes to play in, provided that <b>both Umpires of the day have</b>
countersigned this form as being correceived by the Registration Secreta	ompleted BEFORE the start of the match. The completed form must then be ry by 12.00 mid-day on the Wednesday following the Match. The player may
not play a second game for this Club received from the Registration Secretar	until his registration has been confirmed and his registration number has been y. (Administration Rule 4.3.5)
UMPIRE (a) (print name)	Signature:
UMPIRE (b) (print name)	Signature:
When completed this form should be sent immediately to the League Registration Secretary, Roy Harrison at :-	
42 Coriander Way, Whiteley, FAREHAM, PO15 7HQ or it can be faxed to – 08719 896 181	
or scanned & e-mailed to registrations@lowfield.co.uk  ECB / LEAGUE USE ONLY	
Date received:	League ID <b>SOU</b> / Player ID number: