

UKDA NATIONAL LEAGUE PLAYER REGISTRATION AND AGREEMENT

NATIONAL LLAGUIT TEAM:	REGIST	RATION DETAILS (PLEASE CON	IPLETE IN BLOCK CAPITALS)	
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MALE FEMALE [please tick appropriate box] DATE OF BIRTH: / / Home Address (in full):	Name of Super League Team:			
Hume Address lin full:	Surname:	Forename:	Preferred Name:	
County:Postcode:Contact Number:	MALE FEMALE) (please tick appropriate box)	DATE OF BIRTH:	/ /
EMAIL ADDRESS [mandatory for all communications]:	Home Address (in full):			
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