



WEST AUSTRALIAN COUNTRY FOOTBALL LEAGUE
MATCH DAY PERMIT APPLICATION

I,
(Full name)

of
(address)

being a member of the
(Current club)

affiliated with the
(Football League/Association)

Date of birth.....hereby apply for a Match Day Permit to play
with the
(Name of Match Day club)

on
(date of match)

Signed

Signature of parent/guardian.....
if under 18 years of age

(This application form is to be completed on or prior to the day of the match and attached to the Official Team Sheet and forwarded to the League/Association Registrar)