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| --- | --- |
| The league is required to submit a list of its office bearers | |
|  | |
| Any amendments to this list during the season must be notified to the National Secretary | |
|  | |
| **Note: The form should be completed in block capitals** | |
| Name: | Name: |
| Address: | Address: |
|  |  |
| Post Code: | Post Code: |
| E-Mail: | E-Mail: |
| Date of Birth: | Date of Birth: |
| Phone Number: | Phone Number: |
| Mobile: | Mobile: |
| Position: | Position: |
| **I agree to be bound by the Constitution & Rules of the SAFA** | **I agree to be bound by the Constitution & Rules of the SAFA** |
| Signature: | Signature: |
| Name: | Name: |
| Address: | Address: |
|  |  |
| Post Code: | Post Code: |
| E-Mail: | E-Mail: |
| Date of Birth: | Date of Birth: |
| Phone Number: | Phone Number: |
| Mobile: | Mobile: |
| Position: | Position: |
| **I agree to be bound by the Constitution & Rules of the SAFA** | **I agree to be bound by the Constitution & Rules of the SAFA** |
| Signature: | Signature: |
| Name: | Name: |
| Address: | Address: |
|  |  |
| Post Code: | Post Code: |
| E-Mail: | E-Mail: |
| Date of Birth: | Date of Birth: |
| Phone Number: | Phone Number: |
| Mobile: | Mobile: |
| Position: | Position: |
| **I agree to be bound by the Constitution & Rules of the SAFA** | **I agree to be bound by the Constitution & Rules of the SAFA** |
| Signature: | Signature: |
| Name: | Name: |
| Address: | Address: |
|  |  |
| Post Code: | Post Code: |
| E-Mail: | E-Mail: |
| Date of Birth: | Date of Birth: |
| Phone Number: | Phone Number: |
| Mobile: | Mobile: |
| Position: | Position: |
| **I agree to be bound by the Constitution & Rules of the SAFA** | **I agree to be bound by the Constitution & Rules of the SAFA** |
| Signature: | Signature: |

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