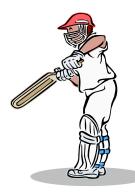
PLAYER REGISTRATION #	
(for official use only)	

Registration #





Bermuda Cricket Board

P.O. BOX HM 992, HAMILTON HM DX, BERMUDA

SENIOR PLAYERS REGISTRATION FORM

			Club					
FULL NAME OF PL	AYER							
		SURNAME			RST	MIDDLE		
PLACE OF BIRTH			DATE OF BIR				VEAD	
				MC	NTH	DAY	YEAR	
ADDRESS OF PLAY	ER	HO	USE NAME AND STRI	<u>EET</u>	<u>P</u>	<u>PARISH</u>	POSTAL CODE	
TEL # WORK			TEL # HOM	E				
<b>CELL</b> #	EMAIL ADDRESS							
Club for which player last re	egistered or played for	r						
I hereby consent to be regist as outlined in the BCB rules			~S.				CLUB	
I further declare that the abo	ove information is cor	rect and i under	take to observe the rules	, regulations a	nd bye-lav	ws of the BC	B.	
Signed by the player in the p	presence of:		_	Signature	of Player			
Signature of:	PRESIDENT	OR	SECRETARY	OR	ASSIST	FANT SECI	RETARY	
				DATE:				
This certifies that the above		-			-	-		
B.C.B. USE ONLY:								
B.C.B. SECRETARY			DATE:					
1. This form must be complete	ed in ink or type written	and must be for	warded to the secretary of th	ne B.C.B				

2. All transfers must be lodged with the board by  $31^{st}$  March each year thereafter.