



Walsall Junior Youth Football League

A Charter Standard League
www.wjyl.co.uk



MEMBERSHIP APPLICATION FORM Season 2018 - 2019

Please complete this form to apply for Early Bird Membership of
Walsall Junior Youth Football League

All forms must be fully completed in **BLOCK CAPITALS** and returned with full payment to the League Secretary,
Alberta Wood, no later than **31st May 2018**

| | | | |
|----------------------------------------------------------------------------------------|--|--------|--|
| Name of Club | | | |
| Name of Club Chairman | | | |
| Telephone | | Mobile | |
| E-mail (for official league use only) | | | |
| Signature | | Date | |
| Name of Club Secretary | | | |
| Telephone | | Mobile | |
| E-mail (for all communications (mandatory)) | | | |
| Signature | | Date | |
| Address of Club Secretary (inc Post Code) | | | |
| Name of Welfare Officer | | | |
| Telephone | | Date | |
| E-mail | | | |
| FA Affiliation Number – 2018/19 Forward when received, before July 31 st | | Date | |

All fields must be completed fully
Information provided will be used on the league website unless otherwise stated

In signing this application, we do hereby agree for and on behalf of the said Club, if elected or accepted into Membership, to conform to the Rules and Regulations and to accept, abide by and implement the decisions of the Management Committee of the Competition, subject to the right of appeal in accordance with Rule 16.

All clubs must affiliate to a Football Association

Contact either Staffordshire FA 01785 256994 or Birmingham FA 0121 357 4278.
Your affiliation Number must be sent to the League Secretary as soon as received from County FA.

All clubs MUST attend the League A.G.M

Full payment of £50 for Mini Soccer teams and £65 for 9v9 and 11 a side teams must be submitted with this application form.

This payment will be non-refundable unless a team is not accepted at the AGM.

Please make all cheques payable to **Walsall Junior Youth Football League, (not WJYL).**

If you require any further information or help with your application, please contact
Alberta Wood Tel: 07958 536532 (after 6pm) Email: alberta_wood@hotmail.com



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| | |
|----------------------------------------------------------|--|
| Club Name | |
| Club Location (ie Aldridge, Bloxwich, Cannock) | |

If you are entering more than one team per age group or wish the team to have a different name from the club, please fill in each team name in the team name box provided. (Use extra paper if needed)

| Age Group and Format (Under) | Total Number of Teams | Amount per Team | Team Names Only if different to club name (Colts, Cubs, Panthers etc) | Tick or Highlight Teams New to WJYFL | Total Amount |
|------------------------------|-----------------------|-----------------|-----------------------------------------------------------------------------|--------------------------------------|--------------|
| 7 5 v 5 | | £50 | | | |
| 8 5 v 5 | | £50 | | | |
| 9 7 v 7 | | £50 | | | |
| 10 7 v 7 | | £50 | | | |
| 11 9 v 9 | | £50 | | | |
| 12 9 v 9 | | £50 | | | |
| 13 11 v 11 | | £65 | | | |
| 14 11 v 11 | | £65 | | | |
| 15 11 v 11 | | £65 | | | |
| 16 11 v 11 | | £65 | | | |
| 17 11 v 11 | | £65 | | | |
| Overall Total | | | | | £ |

Please make all cheques payable to the **Walsall Junior Youth Football League**, (not WJYL)
BACS payment can be made using **Sort Code 40-12-20 Account Number 21111590**

**If you require any further information or help with your application please contact
Alberta Wood Tel: 07958 536532 (after 6pm) Email: alberta_wood@hotmail.com**

This form must be sent to: **Alberta Wood, 17 Comberford Drive, Wednesbury, WS10 0UA**