



REPUBLIC OF LIBERIA

Ministry of Youth and Sports



19th Street, Sinkor
Monrovia, Liberia

2016/2017 NATIONAL COUNTY SPORTS MEET

PLAYER'S REGISTRATION FORM

KICKBALL

County: _____ Form # _____

Player's Name _____
Last First Middle

Date of Birth: _____
Day Month Year Age

Place of Birth: _____
Town City County/Country

Nationality: _____

LAST CLUB PLAYED FOR IN THE LKF NATIONAL LEAGUE:

_____ _____ _____
Club Division Year

Last County Played For: _____
County Year

I hereby declare that the information being provided is true to the best of my knowledge. Any misleading information shall automatically disqualify me from participating in the 2016/2017 National County Sports Meet. I further agree to abide by all rules and regulations of the tournament.

Signed: _____ Attested By: _____
Player County Coordinator

FOR OFFICIAL USE ONLY

Signed: _____ Approved: _____
Head of Secretariat Chairman/Organizing Committee



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PLAYER'S REGISTRATION FORM

BASKETBALL

County: _____ Form # _____

Player's Name _____
Last First Middle

Date of Birth: _____
Day Month Year Age

Place of Birth: _____
Town City County/Country

Nationality: _____

LAST CLUB PLAYED FOR IN THE LBF NATIONAL LEAGUE:

_____ Club _____ Division _____ Year

Last County Played For: _____
County Year

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PLAYER'S REGISTRATION FORM

VOLLEYBALL

County: _____ Form # _____

Player's Name _____
Last First Middle

Date of Birth: _____
Day Month Year Age

Place of Birth: _____
Town City County/Country

Nationality: _____

LAST CLUB PLAYED FOR IN THE LVF NATIONAL LEAGUE:

_____ Club _____ Division _____ Year

Last County Played For: _____
County Year

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