

**NORTHWEST COUNTIES SQUASH LEAGUE**

15 Coppice Drive, Northenden, Manchester M22 4DT  
Tel (H): 0161 945 4016 Mobile: 07802 556873  
Email: aseccles@btinternet.com

**FIRST DIVISION**  
**PLAYER REGISTRATION 2016/2017 SEASON**

RETURN THIS FORM TO STEVE ECCLES, FIRST DIVISION REPRESENTATIVE

CLUB NAME: \_\_\_\_\_

CLUB REP: \_\_\_\_\_

CLUB REP SIGNATURE: \_\_\_\_\_

**PLAYER DETAILS**

FULL NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ POSTCODE \_\_\_\_\_

TELEPHONE (HOME) \_\_\_\_\_

ARE YOU A HOME PLAYER? YES / NO

STATE HOW YOU QUALIFY AS A HOME PLAYER: (County or Residence)

\_\_\_\_\_

If you qualify by residence, please state the date you took up residency at the address above: \_\_\_\_\_

If you are not a HOME player, please state which County you are qualified to represent in the England Squash inter-county competition:

\_\_\_\_\_

PLAYER SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

ENGLAND SQUASH MEMBERSHIP NUMBER: \_\_\_\_\_

In accordance with Rule 7.7, Clubs MUST provide necessary documentary evidence of any player they require to qualify as a HOME player in accordance with Rules 7.3 (ii).