

TO

CYPRUS FOOTBALL ASSOCIATION

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APPLICATION: FIRST REGISTRATION / RE-REGISTRATION OF PLAYER PRIVATE ACADEMY

The undersigned play	er:					
NAME	SURNAM	ИE	FATHER'S NAME		MOTHER'S NAME	
DATE OF BIRTH	NATIONALITY	PLACE OF	BIRTH	ID NO. / PASSPORT N		NO. JOB
Please proceed with r	 my registration / re-registra	ation* as a play	er of the I	Private Academy		
a. I attach a high reso	lution and recent photo of	myself and a ce	ertified co	py of my ID / pass	port*.	
	not already registered with omitted any other application				under an	y other name, and
c. I also declare that I	am not / I am* registered	with any other	Football <i>A</i>	Association abroad	l .	
				THE APPLICANT		
Date			Signature:			
*Delete what is not applic	able					
with a high resolution	ticity of the above player's n and recent photo and a tration to our Private Acad	certified copy		•	-	• •
		•	RIVATE AC	CADEMY NAME		
(Stamp)	Signature.:		Signature.:			
	Full Name:			Full Name:		
Pres		esident	General Secretary			
Date						
NOTE: An application that is	not properly completed, or that is n	ot accompanied by t	he information	on mentioned therein or	that is not	submitted via Comet will be

NOTE: An application that is not properly completed, or that is not accompanied by the information mentioned therein, or that is not submitted via Comet, will be considered as not received by CFA and will be returned through Comet.

By completing and submitting this document, you consent to the collection and processing of any personal data that is necessary for the purposes of issuing a CFA ID card and registration in the CFA registry of players. This processing is based on CFA's legitimate interests to ensure that each participant agrees with the terms and provisions of the Proclamations of the Competitions, in accordance with the General Data Protection Regulation 2016/679 ("GDPR") and the Cyprus Law on Personal Data Protection 125(I)2018.

DECLARATION

The undersigned (parents' names / custody holders' names), parents / custody holders of						
have no objection to his registration with th	e CFA as a player of the Private Academy					
Signatures 1						
Note: Point 1 and 2 are signed by those exercising parental care. Point 3 is signed by the player.						
CERTIFICATION						
It is certified that the above mentionedcustody holders of the playersigned the above declaration in my presence.						
This certification is given after I have verified the accuracy passport.	of the information on the parents' / custody holders' ID /					
Date	Signature.:					
	Full Name:					
	Community Leader / Certifying Officer (Stamp)					

Note:

This statement is applicable for players who are between the ages of 10 to 18 years old.

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