

## **Zurich Crickets CC - Player registration form**

				Name(s) of Parents/Guardians:			
Gurname:		First name:		Date of birth:	Telephone home:		
Email address(es):		Telephone mobile:		Address:			
Inform	ation red	quired for compet	ting	at internation	al tourna	ments:	
	Nationalit	y(ies):	Country of birth:				
Date of ar		rival in Switzerland:	s	Swiss Permit (B or C):			
Cricketing	g experie	ence:					
Medical d to know abo	etails: Plout (this info	ease state if there are a ormation will be kept in	any	nealth problems or on the problems or one problems or on the problems or on the problems or on the problems or one probl	disabilities v	ve need	
Injuries:							