



# LBBUI- County Affairs Committee

## INTER COUNTY PLAYERS DECLARATION 2025/2026

**THIS FORM TO BE COMPLETED PRIOR TO COMMENCEMENT OF PLAY.**

Name of County \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Number: \_\_\_\_\_

**GRADE/CLASS:** \_\_\_\_\_

**VENUE:** \_\_\_\_\_

**PLEASE MAKE SURE THAT ALL COLUMNS ARE COMPLETE**

	PLAYERS FULL NAME	BI REGISTERED NO	CLUB REGISTERED WITH	POINTS	OFFICIAL USE ONLY ✓
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

Signed \_\_\_\_\_

Date: \_\_\_\_\_