



**ATHLETES IDENTITY CERTIFICATION**

**PROVINCE: LIMPOPO**

**DISTRICT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **REGION / ZONE** |  |  |  |  |
| **TOWN / CIRCLE** |  |
| **NAME OF SCHOOL** |  | **LEARNER REGISTRATION NUMBER: SASAMS / SEMIS** |  |
| **NAME(S) OF ATHLETE****(AS ON BIRTH CERTIFICATE)** |  |
| **SURNAME OF ATHLETE****(AS ON BIRTH CERTIFICATE)** |  |
| **DATE OF BIRTH OF ATHLETE** |  |  |  |  |  |  |  |  | **BIRTH CERT.-/ ID- /****PASSPORT NUMBER** |
| **Y** | **Y** | **Y** | **Y** | **M** | **M** | **D** | **D** |
| **AGE GROUP OF ATHLETE** |  | **BOY / GIRL** |  |

***USE CAPITAL LETTERS ONLY TO COMPLETE THE INFORMATION BELOW***

**PHOTOCOPY OF BIRTH CERTIFICATE / I.D. DOCUMENT / PASSPORT/ SMART CARD**

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| **RECENT ID PHOTO OF ATHLETE** **[NOT OLDER THAN 6 MONTHS]****(*PASTED HERE*)** |

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|  **SCHOOL STAMP HERE****SCHOOL STAMP MUST BE PARTLY OVER THE ID PHOTO AND PARTLY OVER ID, BIRTH CERTIFICATE ETC.*****STAMP MUST INDICATE THE DATE******(SIGNED BY PRINCIPAL/DEPUTY PRINCIPAL)*** |

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| **COMMISSIONER OF OATHS STAMP HERE****(THE PRINCIPAL / DEPUTY PRINCIPAL / SAPS - WHO QUALIFIED AS COMMISSIONER OF OATH)****[NOT OLDER THAN 6 MONTHS]** |

**NOTE:**

THE PRINCIPAL / DEPUTY PRINCIPAL/ SAPS WHO QUALIFIED AS COMMISSIONER OF OATH **MUST** CERTIFY THE BIRTH CERTIFICATE ON THIS TEMPLATE AS A TRUE COPY **AND** PUT SCHOOL STAMP **PARTLY OVER** THE ID PHOTO **AND** PARTLY OVER BIRTH CERTIFICATE.