

Injury: In the event that the player did not play as a result of an injury, written confirmation must be provided from either the National Association's Doctor or the Doctor of his club.

(b) FIFA Rankings

In order to satisfy the criteria, the player's National Association must be in the top 70 of the FIFA Rankings averaged over the two-year period prior to the date of the application. Confirmation of the FIFA Rankings averaged over a two year period are to be found on www.TheFA.com

FIFA Averaged Ranking: _____

5. Details of Representatives being used by Club (e.g. Solicitors)

Name: _____

Address: _____

Postcode: _____

Telephone: _____

Mobile: _____

Fax: _____

E-mail: _____

6. Declaration

This declaration must be signed by an authorised signatory of the employer.

The details given in this application are true and complete to the best of my knowledge and belief.

The employer named in this application is responsible for the terms and conditions of employment and any requirements for registration or licensing necessary for the employment which is subject to this application.

Signature _____ Date _____

Name (CAPITALS please) _____

Position: _____

For and on behalf of _____
(employer)

Please submit the application to:

Rachel Foster
The Football Association
Wembley Stadium
PO Box 1966
London SW1P 9EQ

Tel: 0844 980 8200 # 4629 Fax: 0844 980 0663
Email: Rachel.Foster@TheFA.com