



UGANDA VOLLEYBALL FEDERATION

FIVB

Affiliated to FIVB, CAVB, UOC, NCS

P. O. Box 11232 Kampala, Uganda; Lugogo Indoor Stadium
Fax: +256 414-258350 www.uvbf.org E-mail: ugvolley@hotmail.com

FÉDÉRATION INTERNATIONALE
DE VOLLEYBALL

CLUB DATA FORM 2021

Name of club in full.....

Club names short form..... Club code.....

Club motto or slogan.....

Club colours.....

When and where was the club founded.....

Founder(s).....

Base Region..... League Region.....
(CENTRAL/EASTERN/WESTERN/NORTHERN)

CLUB LOGO

PASTE OR
ATTACH PHOTO OF
THE OFFICIAL CLUB
LOGO

Composition

Number of teams:.....Men.....Women.....

#	TEAM NAME (MEN)	#	TEAM NAME (WOMEN)	#	OTHERS TEAMS - SPECIFY GENDER
1		1		1	
2		2		2	
3		3		3	

Communication and contact

Club's official Physical address:.....

Club's official telephones 1:.....2:.....

Postal address:.....

Club's official website:.....

Club's official email address:.....

Club's official Facebook handle:.....

Club's official Twitter handle:.....

Home grounds

Location of club's official training grounds.....

Preferred hosting grounds for home-games.....

Club's official contact person

Official full names.....Gender.....

Administrative role in the club.....

Email address:.....

Telephones 1:.....2:.....

WhatsApp(if applicable).....

GLUE A COLOURED
PASSPORT SIZE
PHOTO OF THE
OFFICIAL, TAKEN
AGAINST WHITE
BACKGROUND,
HERE

Declaration

I.....Hereby declare that the information provided
on the form is accurate and assented to by the club.

Signature and current date.....



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CLUB'S MANAGEMENT DATA FORM 2021

Club name.....

Club official 1	
Full names :	
Gender:	GLUE A COLOURED PASSPORT SIZE PHOTO OF THE OFFICIAL,TAKEN AGAINST WHITE BACKGROUND, HERE
Official role in the club	
Official's telephones.	
1:	
2:	
3:(whatsApp)	
Official's email address.	

Club official 2	
Full names :	
Gender:	GLUE A COLOURED PASSPORT SIZE PHOTO OF THE OFFICIAL,TAKEN AGAINST WHITE BACKGROUND, HERE
Official role in the club	
Official's telephones.	
1:	
2:	
3:(whatsApp)	
Official's email address.	

Club official 3	
Full names :	
Gender:	GLUE A COLOURED PASSPORT SIZE PHOTO OF THE OFFICIAL,TAKEN AGAINST WHITE BACKGROUND, HERE
Official role in the club	
Official's telephones.	
1:	
2:	
3:(whatsApp)	
Official's email address.	

Club official 4	
Full names :	
Gender:	GLUE A COLOURED PASSPORT SIZE PHOTO OF THE OFFICIAL,TAKEN AGAINST WHITE BACKGROUND, HERE
Official role in the club	
Official's telephones.	
1:	
2:	
3:(whatsApp)	
Official's email address.	

Club official 5	
Full names :	
Gender:	GLUE A COLOURED PASSPORT SIZE PHOTO OF THE OFFICIAL,TAKEN AGAINST WHITE BACKGROUND, HERE
Official role in the club	
Official's telephones.	
1:	
2:	
3:(whatsApp)	
Official's email address.	

Club official 6	
Full names :	
Gender:	GLUE A COLOURED PASSPORT SIZE PHOTO OF THE OFFICIAL,TAKEN AGAINST WHITE BACKGROUND, HERE
Official role in the club	
Official's telephones.	
1:	
2:	
3:(whatsApp)	
Official's email address.	

Declaration

(NOTE: In case of more officials, please use more copies of this form)

I.....Hereby declare that the information provided on the form is accurate and assented to by the club.

Signature and current date.....



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CLUB PLAYERS' REGISTRATION FORM 2021

Club name.....

Gender..... Contact Person..... Tel.....

NOTE: Put names of players of the same gender, as stated above, sequentially and use a new form for more names

PLAYER NAMES

S/N	NATIONALITY	PLAYER FULL NAMES (IN DISTINCT CAPITAL LETTERS)	OFFICIAL IDENTIFICATION NUMBER National ID NIN / Passport Number
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			

For all the players listed on this form, email their; name tagged, current coloured passport size photos, taken against a white background, to ugvolley@hotmail.com with the subject: player's registration photos for 2021, and the name of the club.

It is only acknowledgeable for some Ugandan players below the age of 19 years not to have National ID NIN.

Declaration

I....., as a.....
(state administrative role or position in the club)

hereby declare that the persons whose names appear on this form are bona fide players of this club, stated above and that these persons have consented to appear on this form as players of this club.

Players that appear on this form MUST transfer in order to play for another club the next season, irrespective of having played or not.

Signature And Date.....



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CLUB TEAMS' DATA FORM 2021

Club name.....OBB

Team Details

Team name.....TRUST OBB Team code..... Team gender.....Female

Team's official contact person

Official full names.....Bazira Henry Gender.....Male

Administrative role in the Team.....Club Vice President

Email address:.....obb.volleyballc@gmail.com

Telephones 1:.....+256 782 964912 2:.....

WhatsApp(if applicable).....+256 782 964912

GLUE A COLOURED
PASSPORT SIZE
PHOTO OF THE
OFFICIAL, TAKEN
AGAINST WHITE
BACKGROUND,
HERE

Team Officials' details(e.g coaches, team captains , assistant coaches)

Team official 1	
Full names :	
Gender:	GLUE A COLOURED PASSPORT SIZE PHOTO OF THE OFFICIAL, TAKEN AGAINST WHITE BACKGROUND, HERE
Official role in the team	
Official's telephones.	
1:	
2:	
3:(whatsApp)	
Official's email address.	

Team official 2	
Full names :	
Gender:	GLUE A COLOURED PASSPORT SIZE PHOTO OF THE OFFICIAL, TAKEN AGAINST WHITE BACKGROUND, HERE
Official role in the team	
Official's telephones.	
1:	
2:	
3:(whatsApp)	
Official's email address.	

Team official 3	
Full names :	
Gender:	GLUE A COLOURED PASSPORT SIZE PHOTO OF THE OFFICIAL, TAKEN AGAINST WHITE BACKGROUND, HERE
Official role in the team	
Official's telephones.	
1:	
2:	
3:(whatsApp)	
Official's email address.	

Team official 4	
Full names :	
Gender:	GLUE A COLOURED PASSPORT SIZE PHOTO OF THE OFFICIAL, TAKEN AGAINST WHITE BACKGROUND, HERE
Official role in the team	
Official's telephones.	
1:	
2:	
3:(whatsApp)	
Official's email address.	

Declaration

I.....Hereby declare that the information provided on the form is accurate and assented to by the club's management.

Signature.....



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LEAGUE PLAYERS REGISTRATION FORM 2021

Club name.....

Team name.....Team gender.....Team code.....

Contact Person.....Tel.....

Main Jersey colour	Second Jersey colour	Third Jersey colour
Top.....	Top.....	Top.....
Bottom.....	Bottom.....	Bottom.....

PLAYER NAMES

S/N	NATIONALITY	PLAYER NAMES (IN CAPITAL LETTERS)	DATE OF BIRTH	SIGNATURE
1	UGANDAN	ATWONGIIRE PERUTH		
2	UGANDAN	INYONGAT JESCA		
3	UGANDAN	ALUKA KETTY		
4	UGANDAN	AMITI IMACULATE		
5	UGANDAN	AKANYO AGNES		
6	UGANDAN	KINOBE DAPHINE		
7	UGANDAN	AKANKUNDA PEARL		
8	UGANDAN	KIRABO PRAISE		
9	UGANDAN	KUKUNDAKWE DAPHINE		
10	UGANDAN	AKAMPURIRA MARGRET		
11	UGANDAN	NATUKUNDA INGRID		
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				

Approval

Note: NOT more than 2 non Ugandan players are allowed on the list

TEAM CAPTAIN..... SIGNATURE & DATE.....

HEAD COACH..... SIGNATURE & DATE.....

MANAGER..... SIGNATURE & DATE.....

Note: Coaches, doctor and therapist are the only officials that will be allowed on the team bench during league games



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PLAYER'S DATA ENTRY FORM 2021

Date Of Registration.....

Official Full names.....

Person Data

Player's Photo

First Name..... Gender.....

Last Name..... Date of birth.....

Other Names..... Country of birth.....

Nick Names..... Place of Birth.....

Marital status..... Nationality.....

Languages..... Height(cm)..... Weight(kgs).....

..... Handedness.....

GLUE A
COLOURED
PASSPORT SIZE
PHOTO OF THE
PLAYER, TAKEN
AGAINST WHITE
BACKGROUND,
HERE

Identification document number:.....

(NIN for Ugandans and passport number for non Ugandans)

Sample signature

Phone Numbers:.....

Email(s).....

Place residence or physical address.....

Player's brief Volleyball details

Started playing in the year..... at

First taught to play by?..... Current coach.....

Current club..... List 3 former clubs.....

In this club I play as
(must tick only one box)

- ☐ AN AMATEUR
☐ A SEMI-PROFESSIONAL
☐ A PROFESSIONAL

Are you on contract in this club?
(must tick one only box)

- ☐ NO
☐ YES

Next of kin's information (In case of emergency or out of reach)

Full names..... Relationship.....

Phone Numbers:.....

Emails:.....

Place residence or physical address.....

Club's Declaration

(Must be filled by either club's president, vice president, general secretary or manager only)

I..... as the

(name of the executive member)

(executive role in club)

of club..... here by declare that the player whose details appear on
this form is a member of this club and this information is accurate to the best of my knowledge.

Signature and current date.....

Player's Declaration

I..... Hereby declare that the information provided
on the form is accurate and assented to by the listed next of kin.

Player's Signature and current date.....