



NATIONAL YOUTH SOCCER LEAGUE 2025
U-19 MEN
EXPRESSION OF INTEREST FORM



CLUB DETAILS

1. Name of Football Club

2. IPA Number (please attached certificate)

3. Street Address of Football Club

Suburb

State

Post code

4. Mailing address of Football Club (if different from above)

Suburb

State

Post code

5. Football Club email address

6. Football Club telephone number

7. Which Member Association are you member of?

8. Which Province / Region is the Club from?

CLUB PRIMARY CONTACT INFORMATION

9. Title of contact person

Mr

Mrs

Miss

Ms

10. Name of contact person

First name

Last name

11. Street address of contact person (if different from Q4 above)

Suburb

State

Post code

12. Email address of contact person (if different from Q6)

13. Telephone number of contact person (if different from Q7)

14. Position within Football Club

GENERAL CLUB INFORMATION

16. Please provide the names of all grounds or venues used by your Football Club for training and matches.

a)

b)

c)

17. If your Football Club has a logo, please email a colour image

18. Please provide your Club Officials details

Name e.g. Bob Smith

Position e.g. Head Coach

19. Please provide Football Club's Bank Account details

Name of Bank

Name of Branch

Branch Number

Account Number

Swift Code

20. Fee to pay with Expression of Interest Form

Twenty Thousand Kina (K2,000.00). This amount is Non-refundable.

The Expression of Interest Fee must be deposited directly into the National Soccer League (NSL) account stated below:

Account Name: National Soccer League
Account Number: 1001 174 835
Bank & Branch: Bank of South Pacific / Waigani Drive (198)

Important—Attach a copy of the Bank Deposit Slip and the Bank Deposit Receipt when submitting the EoI Form

SIGNING

The Football Club applies to PNG Football Association to Participate in the NYSL U19 Men 2025 competition. The Football Club warrants that the information on this prescribed form is current and correct. By signing this Form, the Football Club and its Officials agree to comply with all Competition Rules and Regulations.

/ /

(Signature of Football Club President/Chairman) Date

FOR COMPETITION ADMINISTRATOR USE ONLY

Date Received: / / Competition Administrator Approved
Approved By:

PNGFA OFFICIAL USE ONLY

Name: Signature:

(Name & Signature of PNGFA President)

Name: Signature:

(Name & Signature of PNGFA General Secretary)

Date / /

CONTACT ADDRESS

All correspondence must be done through the following contacts:

PNG Football Association
Competition Department
P.O. Box 371, Vision City
National Capital District

Email: CompetitionsDepartment@pngfootball.com.pg

Contacts

Leo Jakanduo Ph: 7188 2357 / 8260 8856
Paul Isorua – Ph: 7211 0382 / 7654 3452

Important: If any of the details provided change, the Competition Department must be immediately notified

Important Notes for the NYSL U19 MEN 2025 Season. PLEASE ALL REQUIREMENTS MUST BE FULLFILLED

1. The Expression of Interest fee is K2,000 and is non-refundable.
2. An Affiliation fee of K6,500 for all clubs intending to take part in the National Youth Soccer League – U19 Men Competition with a player registration fee of K50 per player.
3. The total payment per club is K10,000 and this payment should be made before the Competition kicks off.
4. Each team is allowed to register only 30 players
5. All EOI and copies of receipts for the EOI fee must be submitted by the close of business (COB) at 17:00 on Wednesday, 30 April 2025.
6. The deadline for the full payment of the Affiliation fees of K6,500 and player registration fee of K1,500 is on Friday 30 May 2025.
6. The Competition will be played in a Conference League format—Southern and Northern Conference only. The matches will be played in Port Moresby and Lae.
7. The Club must be registered as a Company with IPA and provide a copy of the certificate to the Competitions Department.
9. Club Insurance and provide a certificate of insurance.
8. Registered with IRC / Tax
10. Club must have a Bank Account.
11. Players must be born on or after 01 January 2006.
12. Players must be born on or before 31 December 2007
13. Minimum age 18 and Maximum age 19 to be eligible to participate
14. All Clubs must produce a NID or Birth Certificate for their players to confirm age eligibility.
15. All clubs must provide medical certificates for their players confirming they are medically fit.
16. Employ coaches with certified accreditation (minimum OFC C Coaching License)
15. Minimum six (6) teams per conference

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PAPUA NEW GUINEA FOOTBALL ASSOCIATION
P.O BOX 371, VISION CITY, WAIGANI
NATIONAL CAPITAL DISTRICT
PAPUA NEW GUINEA