



# WOMEN'S CONFERENCE SOCCER LEAGUE 2025

## 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 (K4,000.00). 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 WCSL 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](mailto: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 WCSL 2025 Season. PLEASE ALL REQUIREMENTS MUST BE FULLFILLED

1. The Expression of Interest fee is K4,000 and is non-refundable.
2. An Affiliation fee of K14,500 for all clubs intending to take part in the Women's Conference Soccer League Competition with a player registration fee of K50 per player.
3. The total payment per club is K20,000 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 K14,500 and player registration fee of K1,500 is on Friday 30 May 2025.
7. The Competition will be played in a Conference League format—home and away. The matches will be played in Port Moresby, Lae, Buka, and Mt Hagen.
8. 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.
10. Registered with IRC / Tax
11. Club must have a Bank Account.
12. All clubs must provide medical certificates for their players confirming they are medically fit.
13. Employ coaches with certified accreditation (minimum OFC C Coaching License)
14. The season begins on Sunday 15 June 2025
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