Moorabbin Kangaroos Football Club New Player Welcome!

We're excited to have you join our club!

Please fill out this form so we can get to know you better.

1. Pla	yer Details	
•	Full Name:	_
•	Preferred Name/Nickname:	(so we know what to call you!)
•	Date of Birth://	
•	Contact Number:	_
•	Email:	_
•	Address:	_
2. Foo	otball Background (Helps us place you i	in the right training group)
•	Previous club/experience (if any):	
•	Preferred Position(s):	
•	How long have you been playing? ye	ears
3. Em	ergency Contact	
•	Name:	-
•	Relationship:	_
•	Phone:	_
4. Me	dical Information (Keeps you safe durin	ng training)
•	Any allergies/medical conditions? ☐ Ye If yes, please specify:	
•	Medications (if any):	
5. Get	t to Know You! (Helps us welcome you p	personally)
•	What do you enjoy most about football	?
•	Favourite AFL team/player (if any):	
•	Any hobbies/interests outside football?	?
6. Ho	w Can We Make You Feel Welcome?	
•	Do you prefer a buddy player to help yo	u settle in? □ Yes □ No
•	Any specific questions/concerns?	