Gosford Junior Australian Rules Football Club Incorporated

**REGISTRATION FORM 2013**

|  |  |  |  |
| --- | --- | --- | --- |
| PLAYER DETAILS |  | | |
| First Name: |  | | |
| Surname: |  | | |
| Street Address: |  | | |
| Suburb |  | Post Code |  |
| DOB |  | Age at 31st Dec 2013 |  |
| School |  | Year: |  |

**□** Existing Player **□** New Player . Referred by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What AFL team do you support ? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| PARENTS DETAILS |  |  |  |
| #1 Name |  | #2 Name |  |
| #1 Phone |  | #2 Phone |  |
| #1 Email |  | #3 Email |  |
|  |  |  |  |

* I acknowledge that my child’s team placement is solely at the Clubs discretion and I agree to abide by the laws and the by-laws, rules and regulations of the Australian Football League and its subcommittees.
* I acknowledge that my child’s coach or coaches will have sole responsibility with regard to the team list.
* I acknowledge that I will abide by the Code of Conduct which can be found on the Club’s website.
* Registration also includes player insurance and provides the loan of a Club Guernsey which is to be returned at the end of the playing season.
* I consent to being contacted at the above listed email addresses and/or mobile phone numbers for Club communication and newsletters.
* I agree to allow the Club to use my child’s name and any photographs, sound and film recordings taken of my child for the promotion of the Club, its services, business partners and initiatives to the media and general public.
* I agree that I will not leave my child unattended at either training or during game day without prior discussion with my child’s coach.
* We agree that should any injury occur, the Auskick Centre or Club will, at all times, endeavour to notify me/us but, should an emergency exist, I/we grant the centre or club (or an official) the authority to seek an ambulance and/or medical attention

**FULL NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent □ Guardian □**

**SIGNATURE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please make your payments payable to:**

**Account Name: Gosford Tigers Junior AFL**

**Bank: Bendigo Bank**

**BSB: 633 000**

**Account Number: 1451 87621**

**Please type your surname and initial as reference.**