



# Registration Form

# Season 2009

Club: **Willoughby Wildcats JAFC**

Return to: **PO Box 438 St Leonards NSW 1590.**

- NAB AFL Auskick       New Player  
 AFL Competition Player       Returning Player

## Personal Details

First Name:  Preferred Name:   
 Middle Name:  Country of Birth:   
 Family Name:   
 Date of Birth:   
 Gender:  Male  Female  
 Identification:  A club official has sighted evidence of Date of Birth?      Name of Official:

## Contact Details

Address:   
 Suburb:   
 State:   
 Post Code:   
 Phone (H):   
 Phone (W):   
 Phone (M):   
 Email:

## Parent/Guardian

Parent/Guardian 1		Parent/Guardian 2 or Emergency Contact	
First Name:	<input type="text"/>	First Name:	<input type="text"/>
Surname:	<input type="text"/>	Surname:	<input type="text"/>
Country of Birth:	<input type="text"/>	Country of Birth:	<input type="text"/>
Phone:	<input type="checkbox"/> As above	Phone:	<input type="checkbox"/> As above
Email:	<input type="checkbox"/> As above		

### Area of Assistance:

- Coaching       Administration       First Aid       General Helper       Umpiring

## Other Details

- Mailing List ?:**  I am happy to receive information from my chosen AFL club?  
 I am happy to receive information from the AFL and AFL affiliates (states)

**School Name:** \_\_\_\_\_

**School Suburb:** \_\_\_\_\_

**AFL Supporter:** Which AFL club do you support?

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> Adelaide Crows      | <input type="checkbox"/> Essendon Bombers  | <input type="checkbox"/> Kangaroos           | <input type="checkbox"/> St Kilda Saints   |
| <input type="checkbox"/> Brisbane Lions      | <input type="checkbox"/> Fremantle Dockers | <input type="checkbox"/> Melbourne Demons    | <input type="checkbox"/> Sydney Swans      |
| <input type="checkbox"/> Carlton Blues       | <input type="checkbox"/> Geelong Cats      | <input type="checkbox"/> Port Adelaide Power | <input type="checkbox"/> West Coast Eagles |
| <input type="checkbox"/> Collingwood Magpies | <input type="checkbox"/> Hawthorn Hawks    | <input type="checkbox"/> Richmond Tigers     | <input type="checkbox"/> Western Bulldogs  |

**AFL Member:**  I am currently a member of this club?

**AFL Attendee:** How many national AFL matches on average would you attend each year? \_\_\_\_\_

**AFL Viewer:** How regularly would you watch AFL on TV?

- Never  At least once a week  Every 2-3 weeks

**AFL Participant:** How did you find out about participating in Auskick or playing junior AFL in your local area?

- |  |   |  |                                      |
|--|---|--|--------------------------------------|
| <input type="checkbox"/> AFL Banner        | <input type="checkbox"/> AFL Community Camp | <input type="checkbox"/> AFL Development Officer | <input type="checkbox"/> AFL Flyer   |
| <input type="checkbox"/> AFL Ground (Club) | <input type="checkbox"/> AFL Website        | <input type="checkbox"/> Parent                  | <input type="checkbox"/> Print Media |
| <input type="checkbox"/> Radio             | <input type="checkbox"/> School Newsletter  | <input type="checkbox"/> Sibling                 | <input type="checkbox"/> Television  |
| <input type="checkbox"/> Other             | <input type="checkbox"/> Friend *           | _____  |                                      |

\* The above friend referred me to this club

### Applicant

I agree to abide by the 'Competition Rules and Bylaws' of AFL Greater Sydney Juniors Incorporated.

I will observe and obey these rules and bylaws and be bound by all rulings made by or with the authority of the Association that relate or apply to me.

I declare that the information supplied by me is true and correct.

### Parent/Guardian

I/We hereby consent to this registration to participate in Auskick or play AFL.

I/We acknowledge that I/we have been provided with, and understand, the 'Code of Conduct' of AFL Greater Sydney Juniors Incorporated'.

I/We hereby agree to abide by the code; and observe and obey this code and all rulings made by the Association that relate to me/us, other family members and invited guests.

I/We agree that images of my/our child may appear on the AFL Greater Sydney Juniors website however such images may not be identified by name.

I/We understand that the Association may withdraw or suspend my child's registration to participate in Auskick or play AFL should I/we fail to comply with the code and/or rulings of the Association should I/we breach the code.

I/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 .



.....  
Signature of Applicant (if over 12 years)

.....  
Signature of Parent/Guardian

.....  
Date this form was completed

**Return to: PO Box 438 St Leonards NSW 1590**

**Cheques Payable to: Willoughby Wildcats J AFC**

**Direct Debit Details: (Please put your family name in the transaction details)**

**Bank** ANZ

**BSB** 012-141

**Account** Willoughby Junior Australian Football Club

**Account** 8513-67513

**All enquiries should be directed to registrar@wildcatsafl.com**