

FRANKSTON Y. C. W. JUNIOR FOOTBALL CLUB



Correspondence:
P.O. Box 532, Frankston. 3199
Telephone:(03) 9789 6938

Club Rooms:
Jubilee Park, Frankston. 3199
President: Rob Street Mobile: 0407 817 648

APPLICATION FOR JUNIOR REGISTRATION 2010

PLAYERS DETAILS Footyweb # Team
(Office Use)

Surname First Name

Date of Birth Age as of Previous Club if transferring

Previous Auskick Group (if new registration)

Postal Address Suburb Post Code

Home Telephone Player's Mobile

School Player's Email

All families will be expected to abide by the Code of Conduct. By signing this document I agree to abide the Code of Conduct.

MEDICAL DETAILS **Private Health Insurance is recommended by Frankston YCWFC**

Does your child have any medical conditions that the team trainer should be made aware of?

If so please indicate

Any preventative medication should be brought to all training and matches i.e. inhalers for asthma

I consent to the Frankston YCWFC obtaining medical treatment for my child in an emergency
I consent to the Frankston YCWFC calling an ambulance at my expense if deemed necessary

Emergency Contact Name & Number (in the event a parent cannot be contacted)

CHECK LIST

- Application completed on both sides
- VCFL Registration Renewal completed (if applicable)
- VCFL Registration New completed (if applicable)
- VCFL Registration New & Transfer Section completed (if applicable)
- Birth Certificate (copy) supplied (first time player in any league or transfer from outside F&DJFL)

FRANKSTON Y. C. W. JUNIOR FOOTBALL CLUB



Correspondence:
P.O. Box 532, Frankston. 3199
Telephone:(03) 9789 6938

Club Rooms:
Jubilee Park, Frankston. 3199
President: Rob Street Mobile: 0407 817 648

PARENT DETAILS

First Name	First Name
Last Name	Last Name
Address	Address
Home Phone	Home Phone
Work Phone	Work Phone
Mobile Phone	Mobile Phone
Email	Email
Occupation	Occupation

I am interested in joining the YCW Junior Committee I am interested in finding out about sponsoring the club or team I have a Working With Children's Registration My WWC's Registration # is <input style="width: 150px;" type="text"/>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%;">Yes</td><td style="width: 50%;">No</td></tr> <tr><td>Yes</td><td>No</td></tr> <tr><td>Yes</td><td>No</td></tr> </table> I am interested in joining the YCW Junior Committee I am interested in finding out about sponsoring the club or team I have a Working With Children's Registration My WWC's Registration # is <input style="width: 150px;" type="text"/>	Yes	No	Yes	No	Yes	No
Yes	No						
Yes	No						
Yes	No						

NOTE ALL INFORMATION ON THIS DOCUMENT IS CONFIDENTIAL AND TO BE USED ONLY BY THE FRANKSTON YCWFC.

PREFERRED METHOD OF PAYMENT IS CASH. CHEQUE WILL BE ACCEPTED HOWEVER ANY BANK FEES INCURRED BY FRANKSTON YCWFC SHOULD A PAYMENT BE DISHONoured WILL BE ADDED TO THE PLAYER'S REGISTRATION FEE. SORRY NO CREDIT CARDS ACCEPTED.

It takes quite a number of volunteers to field each of the teams so families will be asked to assist from time to time with the various duties. The rostering of these duties will be arranged by the team manager or the Frankston YCWFC Junior Committee.

All families will be expected to abide by the Code of Conduct. By signing this document I agree to abide the Code of Conduct.

I have read, understand and agree to all conditions on this form and am the player's parent or guardian

Signed <input style="width: 300px; height: 30px;" type="text"/>	Signed <input style="width: 300px; height: 30px;" type="text"/>
---	---