



Darebin Women's Sports Club Inc

Application for Membership 2013

I, (Name of applicant) Of, (Street No) (Street)

(suburb) (State) (Postcode) hereby apply to become a member of the Darebin Women's Sports Club.

Please Tick Type of Membership:

Playing membership:

- Sport: 1. Football AFL
Sport: 2. Soccer
Sport: 3. 8 Ball
Sport: 4. Youth Girls...AFL (U/18 Parent Consent)
Sport: 5. Cricket

Social Membership:

Life Member:

Member Details:

Phone: (Home) (Mobile) (Work)

Email: (please print clearly) Age: Date of Birth:...../.../.....

Occupation: Qualifications:

(This information is used for statistical analysis of club demographics only)

In the event of my admission as a member of the Darebin Women's Sports Club, I agree to be bound by the rules of association for the time being in force and pledge to observe all of the club rules, regulations, codes of conduct and policies.

I acknowledge that the Darebin Women's Sports Club has advised me to obtain personal private health insurance and ambulance cover in addition to the insurance cover provided by my affiliated sport if I am a playing member of the club.

Signature of Applicant: Date:/...../.....

I hereby accept the nomination of the above applicant for membership to the association,

..... (Signature of Club President /Secretary) Date:/...../.....

Office Use

Date received by Secretary:/...../..... Julia Chiera

Signature of Secretary

Approved/denied by Board (please circle)

Date annual subscription received/...../..... and member entered into Register of Members.