

Fremantle Hockey Club

Stevens Reserve, Cnr Swanbourne & Stevens St, Fremantle Ph: [08] 9335-6102
Mailing Address: PO Box 344, Melville WA 6956
www.frehockey.com



2010 JUNIOR REGISTRATION FORM – Rego Day 20th Feb 2010 @ Clubrooms

PLAYER DETAILS: _____ DATE: _____

First Name: _____ Surname: _____

Date of Birth: ____/____/____ School Year ____ Age at June 30, 2010 ____

Gender: Male Female School Attending: _____

Address: _____

Suburb _____ Postcode _____

Telephone: (Home) _____ (Mob) _____

Email: _____ @ _____
Please print legibly

Clearance Req: Yes No Previous Club: _____ Grade last played: _____

Position Played: _____

Parents/Guardian Details:

Mother: _____ Ph: _____

Mob: _____

Email: _____ @ _____

Father: _____ Ph: _____

Mob: _____

Email: _____ @ _____

Other (Boarders – please fill in your school contact): _____

Ph: _____ Mob: _____

Email: _____ @ _____

I/We are able to assist with:

Coach: Team Manager: Committee Member: Umpire Sub Committee Sponsor:

Other: _____ Name: _____



2010 JUNIOR REGISTRATION FORM

Registration Fee Structure

Grade	Hookin2Hockey Minkey	Hookin2Hockey Grads	J 5/6 Years 5/6	J 7/8 Years 7/8	J 9/10 Years 9/10	J 11/12 Years 11/12
	\$75	\$75	\$85	\$105	\$105	\$105
Player shirt Deposit	N/A	N/A	\$40	\$40	\$40	\$40
Hookin2Hockey Equip pack or Hat & t'shirt Shirt size						

A separate form needs to be filled in for each child however please attach all forms together and payment can be made in full for all children in one cheque, cash or credit card payment.

I am prepared to sell fundraising chocolates or I wish to give a \$25 family fundraising donation

Family Fee Calculator		\$
Family Players		
Total Players Fee		
Shirt Fee \$40 per player (refundable)		
Family Discount \$10 off total bill for more than one child		
Fundraising Donation - \$25		
Total Payment Due		

Payment Made By: Chq: Cash: Credit Card: Visa Mastercard Bankcard

Card No: - - - Expiry Date: /

Name of Card holder: _____ Signature: _____

Receipt Number: _____

Payments can be sent to :-

Fremantle Hockey Club Inc
 P.O. Box 344
 MELVILLE 6956

OR you can email our Club Treasurer for the Fremantle Hockey Club Bank details for Direct Debit.
freohockey@gmail.com



2010 JUNIOR REGISTRATION FORM

Declaration

1. I acknowledge that a parent or guardian **must** be present at every game.
2. Should my child become injured or ill during a training session and neither parent or guardian is present, I authorise the coach or manager to call an ambulance or seek medical attention as required.
3. My child has a known medical condition/allergy:-

Yes No Details

Special instructions

4. I acknowledge that there are risks in playing hockey and agree to indemnify the Fremantle Hockey Club and save it harmless from all liabilities it may suffer arising out of any injuries or loss suffered by my child arising out of any activity involving my child and the Hockey Club.
5. I agree to allow my child to be photographed during the season for use in Club newsletters and in website and newspaper promotions:
Yes (Signed): _____ No (Signed): _____
6. I agree that my child **must** wear a mouthguard and shinguards at all training sessions and games.
7. I am aware of the requirement to pay fees in full or contact the Treasurer to make payments by instalments. Failure to pay fees will delay completion of registration and result in ineligibility to train and/or play until rectified.

Fremantle Hockey Club Privacy Policy

The club collects personal information from you for the purpose of your membership to the club and you playing hockey. The club will not provide personal information to other organisations without your consent. Where the club provides information to another party, it will endeavour to always do so in a confidential manner. You agree that the club can provide your personal information to the office holders, employees, contractors and other volunteers of the club for the express purpose of providing the club services to you. **ACCEPTANCE IS INDICATED BY YOUR SIGNATURE ON THIS FORM.**

I acknowledge that the Fremantle Hockey Club has taken out a Player Injury Insurance policy cover for my child with the *Sportscover Australia Hockey WA Group Plan* provided by Hockey WA (full details available at www.hockeywa.org.au). This is a base cover only of \$2000 medical expenses and \$1000 capital benefits plus other defined benefits. This base cover can be topped up individually for any player at a very reasonable premium cost through Hockey WA website, which is highly recommended where private health cover is not held. This top up service is available interactively in one season and not a club.



Parent or Guardians Signature: _____ Dated: _____

2010 JUNIOR REGISTRATION FORM

Declaration

1. Should my child become injured or ill during a training session and neither parent or guardian is present, I authorise the coach or manager to call an ambulance or seek medical attention as required.

2. My child has a known medical condition/allergy:-

Yes No Details

Special instructions

3. I acknowledge that there are risks in playing hockey and agree to indemnify the Fremantle Hockey Club and save it harmless from all liabilities it may suffer arising out of any injuries or loss suffered by my child arising out of any activity involving my child and the Hockey Club.

4. I agree to allow my child to be photographed during the season for use in Club newsletters and website promotions:

Yes (Signed): _____ No (Signed): _____

5. I agree that my child **must** wear a mouthguard and shinguards at all training sessions and games.

6. I am aware of the requirement to pay fees in full or contact the Treasurer to make payments by instalments. Failure to pay fees will delay completion of registration and result in ineligibility to train and/or play until rectified.

Fremantle Hockey Club Privacy Policy

The club collects personal information from you for the purpose of your membership to the club and you playing hockey. The club will not provide personal information to other organisations without your consent. Where the club provides information to another party, it will endeavour to always do so in a confidential manner. You agree that the club can provide your personal information to the office holders, employees, contractors and other volunteers of the club for the express purpose of providing the club services to you. ACCEPTANCE IS INDICATED BY YOUR SIGNATURE ON THIS FORM.

I acknowledge that the Fremantle Hockey Club has taken out a Player Injury Insurance policy cover for my child with the *Sportscover Australia Hockey WA Group Plan* provided by Hockey WA (full details available at www.hockeywa.org.au). This is a base cover only of \$2000 medical expenses and \$1000 capital benefits plus other defined benefits. This base cover can be topped up individually for any player at a very reasonable premium cost through Hockey WA website, which is highly recommended where private health cover is not held. This top up service is available interactively in one season and not a club.

Parent or Guardians Signature: _____ Dated: _____