



Sportsworld Indoor

indoor fun for everyone!

PLAYERS REGISTRATION FORM

www.sportsworldindoor.com.au

NEW MEMBER

RENEWING MEMBER

PLAYERS INFORMATION

SURNAME: (Mr, Mrs, Miss) _____

GIVEN NAME: _____

DATE OF BIRTH: _____

MALE

FEMALE

PHONE: (H) _____ (W) _____ (M) _____

EMAIL ADDRESS: _____

EMERGENCY CONTACT DETAILS

NAME: _____ RELATIONSHIP: _____

PHONE: (H) _____ (W) _____ (M) _____

YOUR ADDRESS DETAILS

ADDRESS: _____

SUBURB: _____

POSTCODE: _____

TEAM DETAILS

TEAM NAME	DAY PLAYED PLEASE CIRCLE						GAME TYPE PLAYED PLEASE CIRCLE					
1st TEAM	S	M	T	W	T	F	SOCCER	NETBALL	DODGEBALL	CRICKET	SOFTBALL	TURBO TOUCH
2nd TEAM	S	M	T	W	T	F	SOCCER	NETBALL	DODGEBALL	CRICKET	SOFTBALL	TURBO TOUCH
3rd TEAM	S	M	T	W	T	F	SOCCER	NETBALL	DODGEBALL	CRICKET	SOFTBALL	TURBO TOUCH

I declare that I am in good health and do not suffer from any ailment, disability or condition that will affect my ability to take part in any sporting activities and/or competitions as organised by Sportsworld.

I have read and agree to the Sportsworld conditions of play as stated in the Centre and on the Sportsworld Indoor website

SIGNED: _____

DATE: _____

OFFICE USE ONLY

MEMBERSHIP LEVEL: _____

EXPIRY DATE: _____

AMOUNT PAID: _____

COMPETITION PERIOD:

Autumn: April/July

Winter: August/November

Summer: Nov/Mar

STAFF SIGN OFF: _____

INPUT BY: _____

INPUT DATE: _____