



# COACHES REGISTRATION FORM

(As at 1 February, 2007)

Fax: (02) 9360 2255 Email: alana.shackleton@aflnswact.com.au



1. All Coaches are required to fill out and sign the a Coaches Registration Form annually.
2. Coaches must be provided with a copy of this competition's Code of Conduct.
3. The club is required to keep this signed paper form.
4. A copy should be faxed or emailed (scanned) to the League once all sections have been completed.
5. Coaches are not required to gain a transfer or clearance unless they will be a Player/Coach. New players will also be required to complete a Player Registration and Transfer Form.

## PERSONAL DETAILS (Please complete using BLOCK letters)

FIRST NAME(S):

SURNAME:

DOB:  /  /  ADDRESS: No:

STREET:

SUBURB:

STATE:  POSTCODE:

CONTACTS: (H)  -  (W)  -

(M)  -  -

EMAIL

Would you like to receive regular AFL (NSW/ACT) updates and news via email? Yes  No

ACCREDITATION IDENTIFICATION NUMBER  (If not accredited please put N/A)

## LEVEL OF ACCREDITATION

LEVEL 1 - AUSKICK  LEVEL 1 - YOUTH  LEVEL 1 - SENIOR

LEVEL 2  LEVEL 2 - AUSKICK  LEVEL 3

YEAR OBTAINED ACCREDITATION  LAST UPDATED

CLUB NAME  COACH  or ASSISTANT

SENIORS  RESERVES  U18  SECOND DIVISION

If more than one team in the competition, please differentiate which of the two/three teams you are coaching

## AFCA MEMBERSHIP

ARE YOU A CURRENT AFCA MEMBER? YES  NO

ARE YOU A FORMER AFCA MEMBER? YES  NO  FINAL YEAR

BRANCH

## COACHES SECTION

Signature of Coach: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby agree that I am bound by the rules, by-laws and policies of the club, the league and the AFL (NSW/ACT) Commission Ltd ("the Commission") as amended from time to time ("the Rules"); I acknowledge that my failure to adhere to the rules may result in de-registration; and I consent to the league and the Commission to use the information on this Registration Form for purposes other than registration. I declare that the information provided by me is true and correct. I authorise this League to advise my former League(s) of this application, via electronic summary if required, and to obtain details of my tribunal history if the league so chooses. *I have received and understand my responsibilities under the League's Code of Conduct.*

## OFFICIALS SECTION (MUST be completed by the Club Secretary/Registrar or President ONLY)

Signature of Official: \_\_\_\_\_ Name of Official: (Print) \_\_\_\_\_ Date: \_\_\_\_\_

In submitting this form, I declare that the information supplied is in accordance with the copy retained on file by the club. All relevant information and documentation is available upon request of the league.