



MANNINGHAM COBRAS AMATEUR FOOTBALL CLUB

PLAYER'S HANDBOOK 2013

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FROM THE PRESIDENT

Welcome to season 2013.

On behalf of the Committee, I would like to welcome all the new people down to the club and to welcome back all those who have been around for a few years as well.

I am predicting that 2013 will be a great year for the club. Building on the off field success of the past few years and an improved on field showing in 2012, I am sure Anthony Pezzimenti and his team of coaches are setting the club up for a fantastic season.

Off the field, the club has been working really hard to improve the facilities at the club. In 2012, the club purchased gym equipment, upgraded massage tables, purchased a new fridge for the canteen and improved the ground lights for training. At the time of writing this, the club was still working hard with the council to improve the pavilion, its rooms and its facilities at Koonung Reserve. This is a big undertaking and isn't necessarily an easy project – accordingly the Cobras will be temporarily moving to Doncaster Reserve, Doncaster for the 2013 season while works on the pavilion are underway.

The 2013 coaching panel remains relatively unchanged from previous years with Anthony Pezzimenti and Andrew Foscett appointed senior and reserve coaches respectively, which gives consistency to the path forward. The coaching team welcomes a beloved Cobra fresh from retirement, David Trinchi, as a senior assistant coach.

The club is a fantastic place to be around and offers a lot of support and laughs for players, friends and families. It runs many great social events and I encourage you all to participate and have as much fun as possible in your time at the club.

As always, if you need anything please come and see me, email me or call – I welcome all discussions about the club – people who are passionate about this club are always welcome!

A big thankyou to all the Committee for your hard work in the off season, we are all working towards making 2013 the Year of the Cobras!

Noel Bullen
President

HISTORY AND FACTS

HISTORY

Competing in the Victorian Amateur Football Association league (VAFA), the Manningham Cobras AFC first arose as the Bulleen Cobras AFC in 1996 following a merger between Bulleen United and Canterbury North Balwyn football clubs. A name change at the conclusion of the 2008 season has brought the club to its current position in 2013 as the Manningham Cobras AFC.

HOME GROUND

Koonung Reserve. Corner of Furneaux Grove and Allen Street, Bulleen.
Melways Ref. 32 F10

While the pavilion upgrade is occurring, from the start of the season, home ground will be at Doncaster Reserve.

Corner of Doncaster Rd and Leeds St, East Doncaster. Melways Ref. 47 K1

COACHES

	Name	Phone	Email
Seniors Coach:	Anthony Pezzimenti	0425 781 112	anthony@harrythehirer.com.au
Seniors Assistant Coach:	Scott McPherson	0439 993 771	
Seniors Assistant Coach:	David Trinchi	0401 064 405	david.trinchi@anz.com
Reserves Coach:	Andrew Foskett	0439 656 635	andrew.foskett@momentum.com.au
Reserves Assistant Coach:	Mark Unwin		

COMMITTEE MEMBERS & SIGNIFICANT VOLUNTEERS

The Manningham Cobras AFC operates due to the contribution of many volunteers to the club. Included below is a list of your club's 2013 Committee members, along with significant others whom dedicate so much to this great club.

President:	Noel Bullen	
Vice President:	Kead Beauliv	
Secretary:	Jessica Sheehan	
Treasurer:	Nick Molnar	
General Committee:	Nicole Bearzatto	Joe Mustica
	James Bieleny	Scott Robins
	Timothy Conn	Rodney Sheehan
	Neil Fisher	James Stewart
	Brendan Gasparini	Peter Vaughan
Canteen Manager:	Nick Pappas	
Bar Manager:	Timothy Conn	
Property Steward:	Nick Molnar	

WEBSITE AND FACEBOOK














Website: To keep up-to-date with all the club's information, activities and events visit the club website <http://www.cobras.asn.au/>

Facebook: Also join the Cobras Facebook group and get invitation to events and other details.

SMS & Email: Regular information updates and messages from the coach and Committee are also sent via SMS to your mobile phones and via email.

SPONSORS

The Manningham Cobras AFC would like to thank the following organisations for their generous support in 2013.

Logo	Sponsor	What They Do
	The Manningham	Bistro and pokies venue
	DiMattina's Restaurant - Bar	Restaurant and bar
	MFJ Constructions	Construction services
	Bendigo Bank – Templestowe Village Community Bank Branch	Banking and financial services
	MC Security Services	Security services
	AHD Trenchless	Drilling & excavation services
	Moka Pot Café	Café
	The Tyre Factory	Tyre retailer
	West Brunswick Cellars	Alcohol and beverage retailer
	North East Television & Video	Television and electrical retailer
	Melbourne Pipelines	Commercial Pipelines
	James Boags	Beer, Spirits & Wine
	ECS	Export consolidation services
	Graphix Labels & Packaging	Labels & Packaging

CONTACT INFORMATION FOR PLAYERS

Should you require information on a particular area or would like to contribute an idea, please contact the appropriate Committee member as listed below.

Area of Interest	Committee Member / Coach	Mobile	Email
Match Day & General Committee Liaison	Noel Bullen (President)	0418 222 488	noelb@preformed.com.au
Sponsorship & Marketing	Kead Beauliv	0420 252 803	kead.beauliv@ge.com
Club Memberships (and payment options)	Nick Molnar	0421 056 888	nick_molnar@mlc.com.au
Property Steward – Player Uniforms & Merchandise	Nick Molnar	0421 056 888	nick_molnar@mlc.com.au
Player Registration	Jessica Sheehan	0411 359 702	jesschick89@hotmail.com
Job Volunteer Roster	Nicole Bearzatto	0408 330 744	nicoleb@vicsport.ansn.au
Player Liaison	Scott Robins	0431 314 282	srobins@grv.org.au
Social Events	James Stewart	0411 077 197	james.stewart@maroondah.vic.gov.au
Medical & Insurance	Jessica Sheehan	0411 359 702	jesschick89@hotmail.com
Website, Facebook & Technical	James Stewart	0411 077 197	james.stewart@maroondah.vic.gov.au
Past Players/Life Members	Rodney Sheehan	0418 397 484	rish57@bigpond.net.au

RECRUITMENT SPECIAL DEAL

In 2013, players and non-coaches will be rewarded for bringing new players to the club. Any player or non-coach that brings a fully paid up new recruit to the club will **receive cards for 5 free drinks**, redeemable at the club's bar only.

A new recruit is defined as any player who has not played for the club in the previous 3 years and has fully paid up their membership in 2013.

Please see **Nick Molnar** for recording your recruitment and for collecting drink cards.

CLUB MEMBERSHIPS

All players of the Manningham Cobras AFC are required to pay for membership to the club. Aside from gaining eligibility to play, the membership covers player insurance, player-related supplies including medical stock, playing gear, medical trainer payments and the club's affiliation to the VAFA.

Players need to complete the **Membership Form** and return it to **Nick Molnar**.

PLAYING MEMBERSHIPS

Playing Membership Type	Adult Cost \$	Student / Apprentice Cost \$	Includes
New Player	\$350	\$250	Socks, Shorts, Polo, Jumper.
Existing Player	\$300	\$200	Socks, Shorts.
Life Member Player	\$100	N/A	Socks, Shorts.

- Players failing to pay before Round 2 (20/04/13) will incur a 10% increase in membership cost.
- Players failing to pay before Round 5 (11/05/13) will result in ineligibility to play.
- An existing player who does not own a jumper can pay the New Player Membership and receive their jumper.

PAYMENT OPTIONS

Payments can be made via:

- EFT, using the below details (please include your name in the reference):

A/C Name: Manningham Cobras

BSB No: 633-000

A/C No: 136 858 859

- Credit card (Mastercard & Visa only) or EFTPOS – See **Nick Molnar**
- Payment Plan using credit card. Transactions to occur on the following dates:

Transaction	Date	Amount Adult	Amount Student/Apprentice
1 st	Fri, 1 st March	\$100	\$50
2 nd	Fri, 15 th March	\$75	\$50
3 rd	Fri, 29 th March	\$75	\$50
Final	Fri, 12 th April	Remainder	Remainder

Payment plans must be organised before 1st March 2013 using the form attached.

OTHER MEMBERSHIPS

Membership Type	With Polo T-Shirt \$	Without Polo T-Shirt \$	Includes
Life Member Membership*	\$35	Free	<ul style="list-style-type: none"> • First drink free at home games and Thursday nights after training • Discount entry to Past Players Day
Past Players Membership	\$85	\$50	<ul style="list-style-type: none"> • First drink free at home games and Thursday nights after training
Social Membership	\$65	\$30	<ul style="list-style-type: none"> • 1 free drink at home games

* Life membership is awarded at the discretion of existing life members.

Consideration is given to players who have been with the club for at least 10 years or played 200 games.

PLAYER REQUIREMENTS

WHAT PLAYERS MUST DO

Who	Requirement	Submit to	Due by
<u>All</u> Players	Complete "Membership Form" <ul style="list-style-type: none">• Size of playing uniform• Provide payment or credit card details	Nick Molnar	28 th February
	Complete "Medical Information Form"	Jessica Sheehan	11 th April
	Nominate for Job Roster <ul style="list-style-type: none">• Nominate friend or family member for a job during the season	Nicole Bearzatto	11 th April
<u>New</u> Players	Complete VAFA Player Registration Form	Jessica Sheehan	ASAP (to play by Rd 1, best to complete by 31 st March)

NEW PLAYER REGISTRATION

New players are required to fill out the Registration form attached as an Appendix to this document and gain clearance from the VAFA before playing a game. New players are welcome to train with the club before filling out these forms. If you are intending to play from Round 1, then it is imperative that the forms are signed and clearance requested as soon as possible to get the process finalised so that no games are missed and playing gear can be organised. Please fill out the form and contact **Jessica Sheehan** to register as a new player.

It is important that the club has your medical details to enable us to better manage any conditions or injuries that you may have or have had in the past. This is an important part of maintaining the health of players and keeping them on the park. Therefore, all players are required to fill out the Medical Information Form attached at the end of this document and **submit to Jessica Sheehan (Head Trainer)**.

PLAYER UNIFORMS

The Manningham Cobras AFC playing uniform comprises:

- Playing jumper (short or long sleeve)
- Navy Shorts
- Navy Socks

These items can be purchased from the club, however socks and shorts are part of the membership package for everyone (new VAFA shorts manufacturer has meant a change in shorts for 2013).

Players must purchase their own playing jumper (and in fact it is included in new player memberships) and maintain this during the season.

All players are expected to fill out the Membership Form and **return to Nick Molnar** so that playing uniform sizes can be ordered appropriately. The Membership Form is attached at the end of this document.

Please contact **Nick Molnar** to collect your playing gear once you have registered.

All players are expected to bring their playing kit to each match.

- Any bike shorts worn by players must be flesh coloured.
- Players can now wear gloves without the consent of the VAFA.
- The club strongly recommends that all players wear mouthguards.

The Manningham Cobras AFC also has social club wear and other merchandise available. To purchase any playing gear, social club wear or other merchandise, please contact **Nick Molnar**.

Item	Cost
Playing Jumper – short sleeve	\$75
Playing Jumper – long sleeve	\$85
Playing Shorts (Navy)	\$35
Playing Socks (Navy)	\$15
Polo T-shirt	\$45
Hoodie (Grey)	\$55
Cobras Footy Bag	\$35
Cobras Pre Season Training Singlet	\$20

JOBS / VOLUNTEERING

Volunteering is the lifeblood of the club; football games could not occur without them. There are certain official game day roles that are required for a game to take place as well as some other roles that are required to ensure the optimal performance of your team mates. Historically, these roles at times have been difficult to fill.

Seniors	N/A	Goal Umpire	Timekeeper
Reserves	Field Umpire	Goal Umpire	Timekeeper

Seniors	Water Runner x2	Scoreboard (home only)
Reserves	Water Runner x2	Scoreboard (home only)

Therefore in 2013, the club is stipulating that ***as a requirement of playing, every player must nominate a friend or family member to fulfil one game day role at some time during the season.*** Nominations for which round and which role can be submitted and a roster will be prepared based on submissions. Due to clashes, some may not get their first choice, therefore it will be a first-in-first-served process.

All nominations for round and role must be submitted to **Nicole Bearzatto** no later than the Thursday training session before Round 1 (11th April 2013).

PLAYER CODE OF CONDUCT

Players are one of many representatives of the club, but they are often the most visible. The Manningham Cobras AFC aspires to be known as a tough but fair club, both on and off the field.

From a Committee perspective, we would like to ensure that players are respectful to all club property and personnel, including players, coaches, Committee members and their friends and families. This extends to sponsors and opposition clubs.

Sponsors are a key ingredient into making a club run and we want to ensure that they are putting their support into a club with integrity. So we hope you maintain a respectful behaviour at social events, at which sponsors will attend (and in fact events will be held at a sponsor's premises).

FIXTURE

Round	Date	Opponent	Venue	Home/Away	Melways Ref
1	13 April	BYE	BYE		
2	20 April	Chadstone	Jordan Reserve	Away	69 K1
3	27 April	Hawthorn	Rathmines Reserve	Away	45 H10
4	4 May	West Brunswick	Doncaster Reserve	Home	47 K1
5	11 May	North Brunswick	Allard Park	Away	30 A5
6	18 May	Eley Park	Doncaster Reserve	Home	47 K1
7	25 May	Mt Lilydale	Doncaster Reserve	Home	47 K1
8	1 June	Box Hill North	Elgar Park	Away	47 B4
	8 June	Queens Birthday Weekend			
9	15 June	Dragons	Doncaster Reserve	Home	47 K1
10	22 June	Point Cook	Point Cook Reserve	Away	207 G3
11	29 June	Northern Blues	Doncaster Reserve	Home	47 K1
	6 July	No Matches			
12	13 July	West Brunswick	Ransford Oval	Away	29 F10
13	20 July	Hawthorn	Doncaster Reserve	Home	47 K1
14	27 July	Box Hill North	Doncaster Reserve	Home	47 K1
15	3 August	Eley Park	Whitehorse Reserve	Away	47 G10
16	10 August	BYE	BYE		
17	17 August	Dragons	Keeley Park	Away	79 D5
18	24 August	North Brunswick	Doncaster Reserve	Home	47 K1

SOCIAL CALENDAR

Round	Date	Event	Venue
	Thu 4 April	Jumper Presentation	The Manningham
1	Sat 13 April		
2	Sun 21 April	R&G Day	TBA
3	Sat 27 April		
4	Sat 4 May	Ladies Day *	TBA
5	Sat 11 May		
6	Sat 18 May	Past Players Day *	TBA
7	Sat 25 May		
8	Sat 1 June	1 st Dimattina's Night	Dimattina's Bar Restaurant
	Sat 8 June		
9	Sat 15 June		
10	Sat 22 June		
11	Sat 29 June		
	Sat 6 July		
12	Sat 13 July	2 nd Dimattina's Night	Dimattina's Bar Restaurant
13	Sat 20 July		
14	Sat 27 July	President's Luncheon	TBA
15	Sat 3 August	Reverse Raffle	TBA
16	Sat 10 August		
17	Sat 17 August		
18	Sat 24 August	Vote Count / Last Game (if no finals)	TBA
	Fri 27 September (Grand Final Eve)	Presentation Night	TBA

* Event date may be subject to change.

MEDICAL INFORMATION

CLUB INSURANCE

The club maintains insurance in accordance with VAFA guideline and in fact offers more than the minimum available.

Details on how to make a claim are contained in the "Sporting Accident Claim Form" cover letter attached at the end of this document. Claims can be made by filling out the full form which can be obtained from **Jessica Sheehan**.

In general terms, the insurance covers additional expenses not covered by Medicare – in the public health system. It also provides cover for specific injury types. Private services may not be covered, so before undertaking treatment it is best to check with **Sportscover's claims hotline** on **1 300 134 956** to ensure you know what treatment you are or are not covered for.

For further information, please contact **Jessica Sheehan** who can explain the process to you and also help you answer any questions you may have when filling out the form.

AMBULANCE MEMBERSHIP, PRIVATE HEALTH INSURANCE & INCOME PROTECTION INSURANCE

The Manningham Cobras AFC recognise the benefits of being actively involved in sport, but on occasion accidents do happen. Although it is not a requirement of the VAFA or the club, it is highly recommended that all players take out personal ambulance membership and/or private health insurance as well as seriously consider income protection insurance.

No one plans to get injured, but accounting for this risk through ambulance membership or private health insurance can alleviate any stress placed on sports trainer staff in a serious injury situation.

In regards to ambulance membership, the club and its medical staff have been instructed to call an ambulance if they feel it is required. They will not risk your safety or the safety of others by sending you to hospital in private transport. The club will not be liable for any expenses you incur as a result of not having ambulance membership.

For further information on joining Ambulance Victoria visit:

<http://www.ambulance.vic.gov.au/>.

For further information on private health insurance visit:

<http://www.privatehealth.gov.au/> and <http://www.iselect.com.au/>.

The club currently has no affiliation to any insurance agents. If players are seeking any form of insurance, they should contact their own insurance provider.

BUDGET SPORTING ACCIDENT CLAIM FORM

Please read this page first before completing the Claim Form

Dear Member,

Thank you for your Claim Form request. This letter contains important information relevant to your Claim. Please read it carefully and make sure you understand its contents.



WE REQUIRE THE CLAIM FORM TO BE RETURNED
(FULLY COMPLETED) TO SPORTSCOVER WITHIN 120 DAYS OF YOUR INJURY.
DO NOT WAIT UNTIL TREATMENT IS COMPLETE BEFORE SUBMITTING THE CLAIM FORM.

1. The Medical Report on page 7 must be completed by the main Doctor, Chiropractor, Physiotherapist or Dentist who is providing treatment for your injury.
2. Please send all original receipts for Non Medicare Medical Expenses. If you are claiming from a Private Health Insurer, please send those statements along with your receipts.
3. We will commence working on your Claim immediately however, Claims cannot be settled (entitlements calculated) until all treatment relating to the injury has been completed, all accounts have been paid and refunds from your Private Health Insurer have been obtained.
4. In most cases, there are varying Excesses on claims for Medical Expenses. For precise details and information regarding Policy maximums and excesses, please contact your Club or Association.
5. Sportscover Australia values your privacy and makes every endeavour to keep your personal details private and secure in accordance with the Privacy Act 1988. For further information on our privacy statement please visit our website at www.sportscover.com.

If you have any queries, please call us immediately.

CLAIMS HOTLINE: 1300 134 956

EMAIL: asiapac.claims@sportscover.com

Please send all claims correspondence to:

**CLAIMS DEPARTMENT
SPORTSCOVER AUSTRALIA PTY LTD
Locked Bag 6003
Whealers Hill VICTORIA 3150**



VICTORIAN AMATEUR FOOTBALL ASSOCIATION
APPLICATION FOR REGISTRATION AND PERMIT

VFA Office
Use
Date:

PLAYER'S NAME.....

VAFA CLUB.....

GIVEN NAME MIDDLE NAME/S
SURNAME D.O.B.
ADDRESS
POSTCODEMOBILEEMAIL
BIRTH CERT./ DRIVERS LIC./ PASSPORT NUMBER (For U/18 & U/19 Players only)

AMATEUR STATUS

VAFA DEFINITION: An amateur is one who does not receive, either directly or indirectly, any remuneration or reward whatsoever (whether by match payments, expenses or otherwise) in respect to their participation in the VAFA.

1. Will you play in the VAFA strictly as an amateur? **Yes / No** (Please Circle)

TRANSFER FROM ANOTHER CLUB

2. Do you have a current playing contract with another club? **Yes / No** (Contract expiry date)
3. Do you require a Transfer from another club? **Yes / No** (Please Circle. If YES complete Table below)

<u>MOST RECENT CLUB REGISTERED WITH (INCLUDES JUNIOR CLUB)</u>	LEAGUE / ASSOCIATION	YEAR FIRST PLAYED	YEAR LAST PLAYED	PROCESSED ONLINE?
				Yes / No

TRIBUNAL RECORD

(NOTE: Players with 3 or more guilty verdicts or a total of 6 or more weeks in cumulative suspensions will be required to attend an interview with the VAFA before any registration and permit application will be approved.)

4. Are you currently disqualified from playing in any League or Association? **Yes / No** (Please Circle)
5. Do you have a tribunal record in any League or Association? **Yes / No** (If YES complete Table below)

YEAR	CLUB	LEAGUE / ASSOCIATION	OFFENCE	LENGTH OF SUSPENSION

PLAYER APPLICATION FOR REGISTRATION AND PERMIT

I apply to be registered with the VAFA and for a permit to play for the VAFA Club named below. I **certify** the information in this Application is true and correct. I agree to be bound by all applicable Rules, Codes of Conduct and Policies of the VAFA. I **accept** communications, including SMS, from VAFA and associated partners, which may contain a commercial message with no automatic opt-out. I can stop receiving communication by phoning 9537 6777.

Date:/...../..... Applicant's (Player's) Signature:

CLUB APPLICATION FOR PLAYER PERMIT

I have **informed** the Applicant that he may not play in the VAFA unless he maintains his amateur status in accordance with the VAFA definition above. I apply for a permit for the Applicant to represent this Club.

Name of Club Authorised Signatory: Signature:

Date:/...../..... Club Name

Athlete Medical Profile - Personal Record

*All information on this sheet is confidential.
Access to this sheet is limited to Director, Sports First Aider, Sports Trainer and Coach.*

Personal Details

Surname											Given Names																			
Address	Number					Street / Road																								
	Suburb / Town / City																				State			Postcode						
Home Phone	Area Code		Number								Mobile / Business Phone										Number									
Sex	M <input type="checkbox"/> F <input type="checkbox"/>		Date of Birth								Age			Years		Height			Centimetres		Weight			Kilograms						
Blood Group						Do you object to transfusions?										Yes <input type="checkbox"/>			No <input type="checkbox"/>											

Emergency Contact

Surname											Given Names																	
Home Phone	Area Code		Number								Mobile / Business Phone										Number							
Relationship																												

Health Care Details

Medicare Number						Private Health Insurance					Yes <input type="checkbox"/> No <input type="checkbox"/>		Fund																						
Private Doctor																					Telephone					Area Code		Number							
Address	Number					Street / Road																													
	Suburb / Town / City																				State			Postcode											
Can Doctor be contacted at all times? Yes <input type="checkbox"/> No <input type="checkbox"/>																																			
Private Dentist																					Telephone					Area Code		Number							
Address	Number					Street / Road																													
	Suburb / Town / City																				State			Postcode											
Can Dentist be contacted in emergency? Yes <input type="checkbox"/> No <input type="checkbox"/>																																			

Current History

Current medical problems

Regular medications including supplements, stating name and dosage

Allergies

Sports injuries (Please list any injury which is current/recurring or requires surgery)

Past History

Have you had ...

Epilepsy Yes ☐ No ☐
Hepatitis A Yes ☐ No ☐
Hepatitis B Yes ☐ No ☐
Diabetes Yes ☐ No ☐
Heart Problems Yes ☐ No ☐
Heart Murmur Yes ☐ No ☐
Asthma/Bronchitis Yes ☐ No ☐
Hernia Yes ☐ No ☐
Concussion Yes ☐ No ☐

Do you wear ...

Glasses Yes ☐ No ☐
Contact Lenses
Soft Yes ☐ No ☐
Hard Yes ☐ No ☐
Protective Equipment Yes ☐ No ☐
Mouth Guard
at training Yes ☐ No ☐
at competition Yes ☐ No ☐
Other Yes ☐ No ☐

If yes, please specify

Have you sustained ...

A fracture in last 3 years Yes ☐ No ☐

If yes, where?

A dislocation Yes ☐ No ☐

If yes, where?

Do you suffer from ...

Recurring pain in any joint with play/practice? Yes ☐ No ☐

If yes, which joint?

Back / Neck pain Yes ☐ No ☐

Have you ever been treated for a head, neck or spinal injury? Yes ☐ No ☐

Details

Does this condition affect your performance?

*To the best of my knowledge, all information contained on this sheet is correct
(if under 18 please have parent or legal guardian sign)*

Signature

Date

MANNINGHAM COBRAS AFC

2013 MEMBERSHIP FORM



Name: _____ Email: _____

Phone: _____ Mobile: _____

Address: _____

MEMBERSHIP:

(Circle Membership Type)

	FULL	STUDENT	INCLUDES
NEW PLAYER	\$350	\$250	SOCKS, SHORTS, POLO, JUMPER
EXSISTING PLAYER	\$300	\$200	SOCKS, SHORTS
LIFE MEMBER PLAYER	\$100	N/A	SOCKS, SHORTS
	W POLO	NO POLO	
LIFE MEMBER	\$35	\$0	1st drink free Thu and Sat (home)
PAST PLAYER	\$85	\$50	1st drink free Thu and Sat (home)
SOCIAL	\$65	\$30	1st drink free Sat (home) only

APPAREL:

(Tick Appropriate Size)

	16	18	20	22	24		PRICE
MCFC KOOGA PLAYING JUMPER - SHORT SLEEVE							
MCFC KOOGA PLAYING JUMPER - LONG SLEEVE							
	S	M	L	XL	XXL		Included in New Player Memberships
MCFC POLO							
	30	32	34	36	40	42	
MCFC KOOGA PLAYING SHORTS (NAVY)							Included in All Player Memberships
	SIZE 8 - 11						
MCFC KOOGA SOCKS (NAVY)							
	S	M	L	XL	XXL		
MCFC POLO							\$45
	S	M	L	XL	XXL		
MCFC HOODIE (GREY)							\$55
MCFC BAG							\$35

TOTAL AMOUNT DUE

(Please Tick Option)

CHOOSE PAYMENT OPTION		EFT		See details below
	IN FULL	CASH		
		CARD		
	PMT PLAN	CREDIT CARD		Fill out Credit Card Direct Debit form over the page

EFT Details

A/C Name: Manningham Cobras
 BSB: 633-000 A/C Number: 136 858 859
 (Please put your name in the reference)

MANNINGHAM COBRAS AFC

Credit Card Direct Debit Form (Mastercard & VISA Only)



TOTAL AMOUNT DUE (from previous page) _____

(Tick Plan Option)

<input type="checkbox"/> Standard Payment Plan	Amount		
	Date	Full	Student
1st Payment	1st March	\$100	\$50
2nd Payment	15th March	\$75	\$50
3rd Payment	29th March	\$75	\$50
Final Payment	12th April	Remainder	Remainder

<input type="checkbox"/> Alternate Payment Plan	Date	Amount \$
Weekly Debit Amount		
OR		
Week 1 - First payment		
Week 2		
Week 3		
Week 4		
Week 5		
Week 6		
Week 7		
Week 8		
Week 9		
Week 10 - Final payment		

Cardholder Name: _____ **Mastercard/VISA:** _____

Card Number: _____ **Expiry:** _____ **CCV:** _____

Signature: _____ **Date:** _____