Knox Junior Football Club

Knox Gardens Reserve Argyle Way, Wantirna South, 3152 P.O. Box 9042 Scoresby VIC 3179



*** NEW MEMBERSHIP APPLICATION 2016***

2016 PLAYING POLICY

For safety and developmental reasons, all players must register in their correct age group for the 2015 season. Any player who has previously been allowed to play in an older age group will not automatically be permitted to play in a subsequent year. Players may be allowed to play up if the committee believes exceptional circumstances exist. No player is allowed to play more than two years above their age group (EFL Policy). For more information, please refer to the Knox Junior FC website. Please complete and sign this registration form and send to the above postal address or email to <u>knoxjnr@efl.org.au</u>

*****REGISTRATION INFORMATION*****

Family Information					
	Father's Details	Mother's Details			
Name					
Home Phone					
Mobile					
Email					
Occupation					
Postal Address					
Skills that may be					
useful to the Club					

		Player(s) I	nformation			
Name	DOB	Age at 31/12/15	Medical Conditions	School	Fees	
<u>Fees:</u>						
U8 – U12 = \$180						
U13 – U17 = \$200						
If two children from one family register take <u>\$20</u> off combined total						
If three children from one family register take <u>\$40</u> off combined total						
New players: Please complete an EFL registration form and attach a copy of each player's birth certificate to the						
application. EFL registration forms are available from the Club website.						
Uniforms: The Club provides a jumper to each player for the season. Shorts, socks and other apparel are						
available to purchase from	n the Club.					
Postore, All parants are ov	nacted to take t	hair turn in a	aristy of team roles during			

Rosters: All parents are expected to take their turn in a variety of team roles during the season.

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Ρl	Player's history from previous Club(s) – (if applicable)				
	Player One				
	Played from year to year to year				
	Player Two				
	Played from year to year to year				

I/We wish to register my child/children (player/s names) with the Knox Junior Football Club for the 2016 season (the Club).

I/We acknowledge that football is a contact sport and that training and playing may cause personal injury to my child and loss or damage to personal property.

It is also acknowledged that registration with the Club in on the basis that the Club, its committee, coaching officials or other members are not under any liability whatsoever to my child or to me for personal injury and loss or damage of personal property.

I/We consent to the administration of first aid to my child and will authorise the coach or a club official to consent to emergency medical treatment in the event that a parent or guardian cannot be contacted.

I/We also provide personal information to the club, which is given on the understanding that the information is to be used purely as a means of necessary communications between the club and the player and parents/guardians.

I/We also understand that the club effects minimal insurance for players and that the club strongly recommends that parents take out private health insurance for their child playing with the club.

I/We also agree to abide by the code of conduct for parents and spectators as summarised below:

- Encouragement of players to participate according to the rules, and to respect the officials' decisions
- Recognise the value and importance of volunteer coaches and officials
- Demonstrate appropriate social behaviour by not harassing or using foul language to umpires, officials or players
- Respect the rights and dignity of every player regardless of gender, ability, cultural background or religion
- Support all efforts to remove physical and verbal abuse from sporting activities
- Remember that smoking and consumption of alcohol is unacceptable at junior sport

I/We further understand that continual failure or refusal to comply with the above code of conduct may result in my child being refused to participate in all future Club football games as determined by the Knox Junior Football Club committee.

Parent's signature:_____

Date: _____/____/_____/

Credit Card Payment:	Visa/MasterCard
Name on Card:	Expiry:
Card number:	Signature:

Direct Debit:

Knox Junior Football Club Inc BSB: 633 000 Account Number: 150185437 Reference: Player Full Name

Office Use				
Fees paid: yes/no	Birth certificate: yes/no	Payment method:		