



HUSKISSON/VINCENTIA F.C.

P.O. Box 118, Huskisson NSW 2540

ABN: 17041453773

Huskisson Vincentia Football Club Inc Registration Form

FFA Registration Number

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1. Name

2. Address

3. Date of Birth

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4. Contact Details

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5. Parent/Emergency contact

Name & Relationship

Contact Phone

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6. Medical conditions/allergies

7. Agreements

By signing this form, I agree to Football NSW, Shoalhaven District Football Association and Huskisson Vincentia Football Club using my name/child's name and image in the promotion and marketing of Football NSW, SDFA and HVSC, the competitions and programs that are conducted and the commercial relationships that are entered into in connection with those competitions and programs.

I/my child agree/s to comply with the Rules and Policies endorsed and applied by the Huskisson Vincentia Football Club

(To be signed by a parent if the player is under 18 years)

NAME: *Official Use*

SIGNATURE: *Cash/Cheque No.*

DATE: *Receipt No.*