

South East Metropolitan Softball Association (Inc) PO Box 93 Riverton 6148

Email: semsasecretary@iinet.net.au

ADDITIONAL PLAYER REGISTRATION FORM

| Club | | |
|--|------------------|--------|
| Surname | | |
| Given Names | | |
| Date of Birth | | |
| Address | Street | |
| | Suburb | |
| | Post Code | |
| Phone | Home | |
| | Mobile | |
| Email | | |
| Occupation | | |
| Last Club Registered | Club | Season |
| Home Association | | |
| Capacity Please tick position(s) and indicate your current level | Player | |
| | Manager | |
| | Coach | |
| | Scorer | |
| | Umpire | |
| | Committee/Other | |
| Local Council | | |
| | Tenant | |
| | Ratepayer | |
| | Fulltime Student | |
| | | |

SEMSA USE ONLY

| Received | Approved |
|-----------|----------|
| Clearance | Comments |