| South Croydon Football Club Inc 2021 membership application | | | | | | | | |
|--|--|--|--|---------------|---------------------------------|-------------------------|--|--|
| | PRESIDENT: Steve Duke P.O. Box 17, East Ringwood | Victoria 3135 | SECRETARY: Fiona Secretary | | web: sth | croydonfootballclub.com | | |
| Membership Type: | Kennel Club \$350-\$300 Kennel Club Associate \$100 Social Plus \$150 Home Games \$60 | | | | | | | |
| (Please select) | Senior Player \$475 | Senior Player \$475 🗌 Under 19's \$275 | | | Vets \$150 (plus \$10 per game) | | | |
| Women's Player \$275 ** Mudlark Coterie Group membership also available - please speak to a committee member for full details ** | | | | | | | | |
| ALL MEMBER DETAILS MUST BE COMPLETED TO FULFILL CLUB ASSOCIATION AND LICENCING REQUIREMENTS | | | | | | | | |
| MEMBER SURNAME: | IEMBER SURNAME:GIVEN NAMES: | | | | | | | |
| PARTNER SURNAME: | ARTNER SURNAME:GIVEN NAMES:GIVEN NAMES: | | | | | | | |
| ADDRESS: | | | | | | | | |
| SUBURB: | | | | POS | STCODE: | | | |
| TEL HOME: MOBILE: MOBILE: | | | | | | | | |
| DATE OF BIRTH: | | | | | | | | |
| OCCUPATION: | | | | | | | | |
| CAN CLUB NOTICES TO BE SEI | NT TO THE ABOVE EMAIL ADD | RESS? | | YES | | NO | | |
| DO YOU CONSENT TO YOUR I | IMAGE APPEARING ON THE CL | UB'S WEBSITE? | | YES | | NO | | |
| PLAYERS ONLY: DO YOU WISH | H TO PROVIDE AN EMERGENC | Y CONTACT PHONE | NO? | YES | | NO | | |
| IF YES, PLEASE PROVIDE AN E | MERGENCY CONTACT NAME | AND NUMBER | | | | | | |
| MEMBERS CAN YOU ASSIST THE CLUB ON MATCH DAYS? WE NEED HELP FROM VOLUNTEERS. | | | | | | | | |
| The club/teams needs assista | nce with the following jobs o | n match days. Pleas | e circle any area o | of interest. | | | | |
| Canteen/BBQ Umpires Eso | cort Time Keeper | Interchange Stev | vard Spons | orship/fundra | ising | Social functions | | |
| I wish to apply to become a mem | | | | | | | | |
| Should my membership be succes | ssful, I agree to abide by all club a | ınd league rules and p | olicies: | | | | | |
| Applicant's signature: | | | | Dat | e: | | | |
| SCFC use only | | | | | | | | |
| Payment by Cash | Debit (| Card | Credit Card | | | | | |
| Amount received \$ | | | Date | Rec | eipt No. | | | |
| | NU. | | | | | | | |