



REGISTRATION

SURNAME (in block letters)

CHRISTIAN NAME/S PHONE NO

PARENTS NAMES MOBILE NO

ADDRESS

DATE OF BIRTH - Day Month Year

I APPLY TO BE REGISTERED WITH FERNTREE GULLY FALCONS BASKETBALL CLUB.

SIGNED (Applicant) SIGNED (Club Registrar)

INDEMNITY

I, the above, being a registered and financial member of the Ferntree Gully Falcons Basketball Club, hereby indemnify the Executive Committee and Coaches of the Ferntree Gully Falcons Basketball Club against all actions or demands that may be taken or made against or upon the said Club as the result of any hurt or injury being sustained by me or the above mentioned member of the said Club whilst engaged in official Club Practice or Competition.

DATE SIGNED

Parent/Guardian/Player
Strike out that section which is not applicable

RECORD OF SEASONS PLAYED

SEASON	TEAM	SEASON	TEAM
1		14	
2		15	
3		16	
4		17	
5		18	
6		19	
7		20	
8		21	
9		22	
10		23	
11		24	
12		25	
13		26	