

## AFL QUEENSLAND SENIOR REGISTRATION FORM www.aflq.com.au

All new players or players being transferred from another Club are to complete this registration form before being registered as a member with the League for the current season. All players and parents are required to read the terms and conditions of participation and sign the form below.

ALL FIELDS ARE COMPULSORY AND MUST BE COMPLETED - FAILURE TO DO SO WILL DELAY THIS REGISTRATION BEING PROCESSED

League		Club		Gender		
					IALE (please circle)	
First Name		Surname	•	Date of Birth		
					. ,	
Do you identify as Aborigina	l or Torres Strait Islan	ider?	YES/NO (pl	ease circle)		
Do you have at least one par	YES, country of Birth	YES / NO (please circle)				
Address			Suburb		Postcode	
Home Phone Mob	oile Phone 📗 Em	ail				
Emergency Contact Nan	ne	Emergency Contact	Number 1	Emergency (	Contact Number 2	
Play	vers under 18 years of	age at the time of registrat	ion must complet	e the Parent/Guardian deta	ils below	
Parent/Guardian			<i>n below before th</i> nt/Guardian E	<i>e registration will be proces</i> mail	ssed	
	- St. Offic Glat				:	
School						
OGROOT	·	.,				
How did you find out abo	Nut US? /places tick o	201				
Club	Competition	Friends		Other	Print Media	
Radio	School	TV		Website	Word of mouth	
Other Details  AFL Team supported			·			
(once you have indicated your favorite Af	L Club, you may be sent infor	mation by that Club)				
Approx how many AFL g	ames do you attei	nd per season				
Have you participated in an AFL Auskick program?			VEC (NO ( ) )			
If YES, which centre & when?			YES / NO (please circle)			
Have you been registered with the above League before? If YES, which Club? You are required to complete a transfer form			YES / NO (please circle)			
If YES, which Club? You are re	anster form	2207740 (picase choic)				
Have you played in another competition in the past 24 months?  If YES, which Club & League? You are required to complete a transfer form				YES / NO (please circle)		
	Tod are required to de		, , , , , , , , , , , , , , , , , , , ,			
☐ I would like to receive co	mmunications and s	pecial offers that may in	clude tickets to	matches, membership	notifications and other	
promotions from time to tim	e in accordance with	the Australian Footbal	l Policy availab	ie at <u>http://www.aflcomm</u>	unity.com.au/privacy.	
Player	ring I have careed t			:		
I understand that by registe	nng । nave agreed र	o the terms and condition	ns ot participat	ion on the back of this to	orm.	
Players Signature:		W-100				
Parent/Guardian I have read, understand and agree to the terms and conditions of participation on the back of this form.						
Parent/Guardian Signature.		·	•			
<u>Club</u> On behalf of the Club, I dec	slare that the above	details are, to be the be	st of my knowle	edge, true and correct.		
Club Official Name: Club				sition:		
Club Official Signature:						