



## MILL PARK BLAZERS PLAYER REGISTRATION FORM

This form must be completed and lodged together with the appropriate fees and documentation.

### PLAYER DETAILS

**Last Name**

**First Name**

**Male**  **Female**

**Date of Birth**  ( DD / MM / YYYY )

**Address**

**Postcode**  **Home Phone**

**Player's mobile**  (Optional)

**Parent's mobile**  (This will be the primary contact)

**Player's email**  (Optional)

**Parent's email**

**Have you played with another club before? YES**  **NO**

**If YES, please specify**

**Do you have any medical conditions? YES**  **NO**

**If YES, please specify**

I agree to abide by the rules of the association as a member of Mill Park Blazers.

**Player's Signature**  **Date**

### EMERGENCY CONTACT DETAILS

**Name**  **Relationship**

**Phone**  **Mobile**

