



Happy Valley Football Club Inc. Junior Membership Form

2017

U13

U15

U 171/2

PLAYER

Surname: _____ Given Name (s): _____

Residential Address _____ P /C: _____

Postal Address: _____ P /C: _____

Phone: (H) _____ Player's Mobile: _____

School: _____

Email address: _____

Date of Birth: _____ Year Joined _____

ASSOCIATE MEMBERSHIP: Allows entry to Home Games and in return you are required to assist as specified on our Club Volunteer Roster. This totals approximately 4 hrs for the season.

ASSOCIATE MEMBER No 1 Relationship to Player: _____

First Name: _____ Surname: _____

I agree to be included in the Club Volunteer Roster _____ (Signature)

Residential Address: _____ P/C: _____

Postal Address: _____ P/C: _____

Phone: (H) _____ Mobile: _____

ASSOCIATE MEMBER No 2 Relationship to Player: _____

First Name: _____ Surname: _____

I agree to be included in the Club Volunteer Roster _____ (Signature)

Phone: (H) _____ Mobile: _____

For the purposes of running this club, the above information will be maintained on file. Your privacy will be respected. As a member you are expected to abide by all of the policies of the Happy Valley Football Club (available from the Club Secretary)

Photo Consent – do you agree to your child's image being on HVFC media sites	Please write yes(Y)/no(N)	<input type="checkbox"/>
---	----------------------------------	--------------------------

Junior Player Fees are \$200.00 per season Payable by 29th April, 2017

HVFC reserves the right to disallow match play if fees unpaid by the due date unless arrangements have been made with the Treasurer

Payment Details: Date: / / Amount: \$ Receipt No: Cash / M/Card / Chq

Happy Valley Football Club Banking Details: BSB: 105 186 Account No. 021 556240