



Mosman Football Club
www.mosmanfootball.com

Registration Form Juniors 2010 - Junior Mixed & Ladies

Player's Details

Name: _____

Address: _____

DOB (dd/mm/year): _____

School: _____ Male _____ Female _____

Was the player registered with Mosman Football Club in 2009 (Y/N) If so what team: _____

For Girls : Please select which Competition(s) you wish to play in:

___Mixed Team Competition (Saturdays) ___ All Girl Competition (Sundays) ___ Dual Register for Both¹

Please choose one of the following:

___ I would like the opportunity to play for the highest division team which I qualify for based on my skills assessment and age, regardless of whether or not it is with my friends.

___ I would like to play on a team with my friends. I understand playing with my friends may limit my opportunity to play in a higher division team.

Friends' names / preferences for team in 2010 _____

Parent / Guardian details:

Name: _____

Home ph: _____

Email: _____

Mobile: _____

2nd Parent / Guardian details (only if required):

Name: _____

Contact #: _____

Mosman FC relies on volunteers to give your child the best possible experience. What roles are you willing to assist with in 2010? Please select at least one:

- Coaching Licence _____ Team Management
- Administrative Help Event Assistance Other _____

Application to Join MFC and Indemnity

I apply to join Mosman Football Club and agree to abide by its Code of Conduct, all other club policies posted on www.mosmanfootball.com and decisions made by the MFC leadership team. By registering I understand I am making a commitment to the club and my team. I agree to attend a skills assessment session and to attend training sessions and games unless previously arranged with the team coach/manager.

I understand that whilst all care is taken to ensure the safety of players at the activities of the Club, the Club and its Officers and Servants are not in any way responsible for any claim by reason of accident, injury, sickness or otherwise. I grant Mosman Football Club the right to obtain Medical Care for the player from a qualified person should the need arise when I am not able to grant authorisation. I hereby declare that I have received the accident fact sheet and accept the insurance cover issued by the Football NSW Ltd.

I declare all information provided to MFC is correct and the player is not registered with any other Football club.

Player's / Parent / Guardian's ² signature _____ Date ___/___/___

¹ On a case by case basis, MFC will allow girls to be full members or occasional substitutes for mixed teams with similar skills assessment performance

² For players under 18, parent or guardian must sign



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Fees and Documentation Requirements

Junior Fees: U9 to U16 **\$200** U18 Teams (Student Rate) **\$260**

Proof of Age (Copy of Birth Certificate or Passport)

Digital Photo e-mailed to: pachi.jones@gmail.com

Payment Options:

___ Cheque (Payable to Mosman Football Club)

___ Bank Transfer Mosman Football Club BSB: 032 097 Account: 640392 (Reference Players Name)

-----Cash (registration day only)

MAIL TO: Junior Registrar, Mosman FC, PO Box 170, Spit Junction NSW 2088

Club Use

Cheque / Cash / Direct Amount Paid \$ Date rec'd ___/___/2010 Ref
