



# Marist Australian Football Club 2011 Registration



PlayerId: \_\_\_ Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
 Street: \_\_\_\_\_ Suburb: \_\_\_\_\_  
 State: \_\_\_\_\_ Post Code: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Home Phone: (\_\_\_\_) \_\_\_\_\_ Mobile Phone: \_\_\_\_\_  
 email: \_\_\_\_\_  
 Previous Club: \_\_\_\_\_ Games Played: MAFC \_\_\_\_\_

School House: \_\_\_\_\_ Year \_\_\_\_\_ If first time registration please include a copy of your birth certificate when handing in Rego form.

Medical Problems/Allergies? Yes  No

If yes, give details: \_\_\_\_\_

I agree to abide with the Code of Conduct of Marist Australian Football Club and the AFL Canberra Ltd and agree to observe and obey these Codes and all rulings made by MAFC and/or AFL Canberra that relate to me in relation to these Codes of Conduct.

Applicant's Signature \_\_\_\_\_.

Guardian 1 \_\_\_\_\_

Address:  As Above or Other \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

email: \_\_\_\_\_

Yes I am prepared to assist with (circle interests) : Coaching...Team Manager...Team on game day...Team First Aid...Canteen... Club Admin.....

Guardian 2 \_\_\_\_\_

Address:  As Above or Other \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

email: \_\_\_\_\_

Yes I am prepared to assist with (circle interests) : Coaching...Team Manager...Team on game day...Team First Aid...Canteen... Club Admin.....

I/we hereby consent to the registration of the applicant with AFL Canberra.

I/we give approval for the applicant to train with their club and to play matches controlled by AFL Canberra Ltd.

I/We acknowledge that I/we have been provided with, and understand, the Code of Conduct of Marist Australian Football Club and the AFL Canberra Ltd, and we agree to abide by these Codes of Conduct and we agree to observe and obey these Codes and all rulings made by MAFC and/or AFL Canberra that relate to me/us, other family members and invited guests.

I/we agree that images of the above named player may appear on the AFL Canberra website or other newspapers; however such images will not be identified by name unless specific written permission has been obtained./name

I/we agree the applicants name and football record may appear on the AFL Canberra approved Websites.

I/we understand that AFL Canberra may withdraw or suspend the applicant's registration to play with AFL Canberra Juniors should I/we fail to comply with the Code and/or any rulings should I/we breach the Code.

I/we agree that should any injury occur the Club will, at all times, endeavour to notify the parent/guardian or caregiver but, should an emergency exist, I/we agree the Club or an official of AFL Canberra may seek ambulance and/or medical attention.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

(Parent/Guardian No. 1)

(Parent/Guardian No. 2)

**CLUB USE ONLY:** Registration Fee Paid: Yes No. Amount Paid: \$ \_\_\_\_\_ Receipt No. \_\_\_\_\_

Birth Certificate Included (Only required for Players new to MAFC): \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ State: \_\_\_\_\_ Sighted: \_\_\_\_\_ (Club Official's signature)

Please return the completed form with money to the AFL desk on rego day at school or by mail to PO Box 317 Curtin ACT 2605. (Cheque payable to "Marist Australian Football Club" or by BPay Direct to the MAFC Bank Account.

AcctName=Marist Australian Football Club: BSB=082926: Acct Num=454675002: Your Reference=Family/Player Name)

Note: Players for whom registration fees have not been paid will not be permitted to take the field. If paying the registration fee will cause hardship,

Contact President, Brendan O'Rourke ah 62813610 or 0417 705 857.