

# HERVEY BAY HOCKEY ASSOCIATION 2014 5-A-SIDE REGISTRATION FORM

## MEMBER DETAILS – Nomination

TEAM NAME: \_\_\_\_\_

SURNAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

GENDER: (Please Circle)      MALE / FEMALE      DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE (HM): \_\_\_\_\_ PHONE (WK): \_\_\_\_\_

MOBILE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

*(Of Player)*

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_

*(If under 18 years of age)*

*In signing this form I agree to comply with the Hervey Bay Hockey Association Code of Conduct, Ethics, Procedures & Guidelines, 5-A-Side Rules, Regulations and By-Laws of The Hervey Bay Hockey Association Inc.*

**Fee Payment of \$ 15.00 to accompany your registration.**

**PLEASE RETURN COMPLETED FORM:**

*By Email:*

[herveybayhockeyinc@hotmail.com](mailto:herveybayhockeyinc@hotmail.com)

*In Person to the Secretary*



### **Privacy Statement**

*The Hervey Bay Hockey Assoc Inc is committed to the protection of your personal information. Personal information provided to the association will be used for administrative and statistical related purposes, which can be reasonably expected.*

*The Hervey Bay Hockey Association will not disclose any personal information obtained for purposes other than those stated unless written consent is provided.*