



MEMBERSHIP APPLICATION

TEAM NAME (for League only): _____ (2) / (4)

APPLICANT:

I, _____
(first name) (surname) (preferred name)
of _____
(street address) (suburb) (post code)

hereby apply to become a member / renew my membership of the Northern Beaches Volleyball Association Inc. ('NBVA'). In the event that my membership application / renewal is accepted, I hereby agree;

- to be bound by the Constitution and rules of NBVA, it's governing State and National associations for the time being in force, and
- to wear any official playing uniform provided by NBVA or its sponsors, during any competition event, within the event area, and
- without compensation, to freely allow NBVA or its sponsors to use my image and name for the purpose of promoting and marketing beach volleyball and NBVA events generally, and
- to co-operate with the instructions of any NBVA official during competition events, as reasonably requested, including but not limited to responding to interviews and/or other promotional activities in conjunction with competition events from time to time, and
- to conduct myself in a responsible and sportsman like manner at all times.

ASSUMPTION OF RISK / WAIVER OF RIGHTS:

By my signature I confirm that I have read this statement and waive any and all claims and release the Northern Beaches Volleyball Association Inc., its office holders, employees, officials, workers or representatives and Manly Council from any responsibility or liability in respect of any injury or injuries I may suffer as a result of participation in any NBVA event or competition.

Are you a permanent Australian Resident Yes/No - IF NO - you are excluded from some of the benefits relating to Personal Accident cover please contact Sportscover for further information.

X _____
(Applicant / Guardian if player under 18 yrs) (date)

Membership: RENEW NEW

Type : GOLD CASUAL FULL JUNIOR
(Casual membership is for a single league season. All other memberships for one year)

DETAILS :

Email _____ Male // Female

Phone : (h) _____ (m) _____ (w) _____

Occupation: _____ Date of Birth : / / .

Grade : AA / A / B / Social Years Experience : _____

Involvement this year: International National State Club / Social

Are you a member of another volleyball club: YES NO

Name of Club: _____ M'ship No: _____

OFFICE USE ONLY Date rec'd: _____ Amount: _____

M'ship No: _____ d/base : _____ card : _____