



# Toowoomba Hockey Association CASUAL Player Registration Form 2018

## Player Details (please print clearly)

Club: \_\_\_\_\_ Casual 5 Weeks  Casual 10 Weeks

Mr/Mrs/Miss/Ms (please circle one) Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex:  Male  Female Player Group:  Senior  Junior  Under 9  H2H

Are you of Aboriginal or Torres Strait Islander origin?  Yes  No

Address: \_\_\_\_\_ Suburb: \_\_\_\_\_

State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Accreditation (if any):  Umpiring  Technical  Coaching Level: \_\_\_\_\_ Year Obtained: \_\_\_\_\_

Parent/Guardian Name (if u/18): \_\_\_\_\_ Occupation (if over 18): \_\_\_\_\_

I declare that I am 18 years of age and do hereby apply for admission as a member of the Toowoomba Hockey Association Inc. I understand that my membership remains 'provisional' until approved by the Board of Directors. I agree to abide by the rules, constitution and by-laws of the Association.

Proposed by (print name): \_\_\_\_\_ Signature: \_\_\_\_\_

Seconded by (print name): \_\_\_\_\_ Signature: \_\_\_\_\_

## Representative Availability 2018

I do wish to receive the following information:

Skills Development & Training Dates & Times;  
Trial Dates & Times & Training Dates & Times  
Competition Dates, Times & Venues

- I hereby acknowledge the fees and liability incurred by registering as a player.
- I agree to view and abide by the Toowoomba Hockey Association's 'Code of Behaviour' as available at [www.toowoombahockey.com.au](http://www.toowoombahockey.com.au).
- During the course of the hockey season, you or your child may be photographed either individually or as part of a larger group. That photograph may then be published, with identifying information, in the annual end of season presentation or other THA and club publications. I understand the above information and give/refuse (please circle) consent for my/my child's photograph to be published in any of the formats described above.

Player Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_

(If under 18 years, this form must be signed by a parent/guardian)

Club Official: \_\_\_\_\_ Signature: \_\_\_\_\_

## Privacy Statement

The Toowoomba Hockey Association is subject to the provisions of the Privacy Act 1988. Any personal information you provide will be used for the purpose for which it was provided only and will not be disclosed to other persons or organisations without your prior consent or if required by law. You have the right to access and correct any of your personal information that the association holds about you. The club may disclose your information to third parties that provide services under contract to the club. These contracts require the third party to keep your personal information confidential and secure.

Your personal information may be used by the club for marketing purposes. This is to improve our services and to provide you with the latest information about those services and any new related services and promotions.

However, you have the option not to receive this information. If you do not wish to receive marketing and information about our promotions and services, please tick the box below and the club will remove your name from mailing lists.

I do not wish to receive marketing and information about promotions and services.