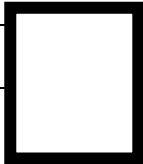


CSNA/Sydney Uni
State Age 2012
PLAYER Registration Form



PLAYER INFORMATION

Name	DOB ___ / ___ / ___ Height _____ (cm)		
Address	Suburb		P/Code
Mobile Contact	Email Address		

Association	Division Played	Year Played	2011
Association	Division Played	Year Played	2010

Preferred playing positions
(up to 2 position)

GS
 GA
 WA
 C
 WD
 GD
 GK

Declaration & Consent - All Players MUST Sign & Date Registration Form

I consent to having my name/photograph(s) published by City of Sydney Netball Association, Sydney University Netball Club or Sponsor/s as required in relation to netball activities on respective Websites or Written Publications. I understand that my name and/or photos will only be used to promote Netball for the betterment of the game in the community.

I understand by signing this Registration form I agree to abide by all City of Sydney Netball Association Policy, Codes of Conduct, Web Consent and pay all required Registration Fees/Costs when determined by the Association for that season.

If I am selected in a team I understand I will be required to advise the Association via email at a date to be set as my "formal acceptance" as member of the team.

Player's Name (print): **Sign** **Date**

Player/Parent/Guardian/Carer Name (print): **Sign** **Date**
(If under 18 years)

REGISTRATION FORMS MUST BE EMAILED TO: sam.dawes@optusnet.com.au