

NAME OF PARENT:

Committee use only:
Cash/Chq/ Online/eft

Date	//
Receipt	No:

Amount Paid

\$



## **East Keilor Football Club-Season 2017 Junior Player Registration Form**

Surname:							
Player Given Na	me:	Date	e of Birth: _	Team: U/_			
(Additional family member	er's players):						
2 <sup>nd</sup> Player Nan	ne:	Date	e of Birth: _	Team: U/_			
3 <sup>rd</sup> Player Nam	ne:	Date	e of Birth:	Team: U/_			
*Note New players: a copy of your child's birth certificate must be attached to your registration form.							
PARENT/GUARE	DIANS NAME:						
ADDRESS:							
PHONE: Home:		Mobi	ile:				
EMAIL ADDRESS	S:						
match of The fo	e to pay cluday. (Payment	plans available - please discuss with Production and match day for in Membership (*Uniform: Jumper	will no resident Geoff ees and Sport	t be able to play  Nicholl)  ing Club Membership.			
<u>Under 11's –</u>	<u>-Under 17's</u>	<u> </u>					
One Player:	\$395.00	A	AusKick:	\$90.00			
Two Players:	\$730.00	Ur	nder 9's:	\$160.00			
Three Players:	\$930.00	You	th Girls:	\$395.00			
Fees can be paid	d on line to:	East Keilor Football Club					
		Bendigo Bank					
		BSB: 633 000					
		Account No: 121 925 473					
*Please Include Surn  *EFT Available a		name as a reference/print a receipt	is recommen	ded.			
Photography/ The East Keilor Foo	Photo Conse	ent: I allow my child's photos [ gular newsletters and publishes e sign below to agree/disagree w	photograph		ıl media		

SIGNATURE: