



Return to 148 Darling Street, Greystanes 2145 or submit by hand by Week 4 of the Competition.

NSW Women's Vigoro Association Inc.

APPLICATION FOR MEMBERSHIP OF ASSOCIATION COMPETITION YEAR 2009/2010

Name:.....

Address:.....

.....P/Code:

I give permission for NSWWVA to use any photography/video of me for promotional purposes and/or display on the NSWWVA official web site. *(Strike out if permission is not given.)*

Telephone (hm): (wk):.....

Mobile: Facsimile:

E-mail address:

Emergency Contact: (Name & Phone No.).....

Occupation (optional):

Date of Birth:...../...../..... Concession No & Expiry:

(Concession to be sighted and form signed by committee member)

New Membership Renewal: Team last Reg:.....

Non-Playing Member Super 8s Competition Opens Competition

Please tick boxes where applicable.

I hereby apply to become a member of the above named incorporated association. In the event of my admission as a member, I agree to be bound by the rules of the association for the time being in force.

Signed: Date:

Signed: Date:

(Parent/Guardian if applicant under 18 years)

Office Use Only

Paid (Amt): (Date):

DISTRICT COMPETITION:

COMPETITION TEAM:.....

.....
Supported

.....
Approved