

## 2014 ASNA Registration Form

You will be considered a current member from the date this form is received with payment by the Alice Springs Netball Association. Compulsory fields are indicated with an '\*'.

Member Details (please print clearly, black pen must be used if faxing)			
Membership #:			
*Surname:			
*First Name:			
*DOB:	/ /	Gender:	F / M
*Address:			
*Suburb:			
*State:		*Post Code:	
Phone No:			
*Mobile No:			
*Email:			

Socio Demographic			
This information is vital to help Netball Australia provide fair, safe and inclusive environment for all. Data will also help your Centre, State Association and Netball Australia seek applicable funding and provide greater opportunities. You will not be individually identified.			
*Do you identify as an Aboriginal/Torres Strait Islander?			
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Undisclosed	
*Are you from a culturally linguistically diverse background?			
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Undisclosed	
• If so, from where:			
• *Do you have a disability?			
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Undisclosed	

Emergency Contact Details	
*Name:	
*Relationship:	
Email:	
Phone No:	( )
*Mobile No:	

Association Details	
Association:	Alice Springs Netball Association
*Club :	
Grade:	
Team Name:	

Membership Types			
<b>Senior:</b>		\$180	1996 or earlier
<b>Junior:</b>	17's,	\$110	1997 - 1998
	15's,	\$110	1999 - 2000
	13's	\$110	2001- 2002
<b>Modified:</b>	11's,	\$80	2003 - 2004
	9's	\$80	2005 or later
<b>Net Set Go!</b>		\$75	2004 - 2009
<b>Non Player:</b> Please tick type		\$50	
<input type="checkbox"/> ASNA Umpire <input type="checkbox"/> Club Umpire <input type="checkbox"/> ASNA Committee <input type="checkbox"/> Club Coach <input type="checkbox"/> ASNA Volunteer <input type="checkbox"/> Club Official <input type="checkbox"/> Other .....			

Previous Registrations	
Association:	
Club:	
Year last played:	
Clearance Attached:	
<b>Clearance required from ASNA clubs only.</b>	

Club Eastside Membership		
Club Eastside is ASNA's Major sponsor. All members over 18 are eligible for a free membership		
<input type="checkbox"/> Yes Please	<input type="checkbox"/> No Thanks	<input type="checkbox"/> Already a member

Umpiring Qualifications					
ASNA umpires receive free ASNA registration, playing or non-playing. (conditions apply please see umpiring coordinator)					
<b>2014 Payment for ASNA umpiring: Badged \$25 per game Level 1 \$10 per game.</b>					
<input type="checkbox"/> YES I would like to umpire for ASNA	<input type="checkbox"/> AA Badge	<input type="checkbox"/> A Badge	<input type="checkbox"/> B Badge	<input type="checkbox"/> C Badge	<input type="checkbox"/> Level 1

Declaration	
<ul style="list-style-type: none"> <li>I agree (members and parents) to comply with the State Member Organisation and Associations Constitution and laws, Netball Australia's Constitution, Regulation and Policies, including but not limited to the Member Organisation and Netball Australia Member Protection Policy.</li> <li>I agree that where necessary the Association may provide my personal information to the state netball body and / or Netball Australia.</li> <li>I understand that the personal information provided on this form will be used for Registration, Insurance and Participation/Club/ Team Management purposes.</li> <li>I understand that if I do not provide the information requested on this form, the Association might not be able to process my registration and I will not be eligible to become a member or compete in the competitions/programs.</li> <li>Please tick the box if you do not want to receive news and special offers from Netball Australia, State Member Organisation or ASNA's valued sponsors: <input type="checkbox"/></li> <li>I give permission for ASNA to use netball related photos for marketing and newspaper articles.</li> </ul>	
I have read, understood and agree to the above terms and I personally consent to the application. I warrant that all information provided is true and correct.	
Signed: (parent or guardian of member under the age of 18 years)	
Name:	Date: