

SOCIAL SPORTS REGISTRATION FORM



Registration Fees to be paid by July 30; Season starts August 5
Weekly Game Fees to be paid prior to each game commencing

Sport Options (please tick)			
<input type="checkbox"/> BASKETBALL (Men's) Mondays \$70 Registration Fees (per team) \$70 Weekly Game Fees (per team)	<input type="checkbox"/> VOLLEYBALL (Mixed) Tuesdays \$70 Registration Fees (per team) \$70 Weekly Game Fees (per team)	<input type="checkbox"/> FUTSAL (Mixed) Wednesdays \$70 Registration Fees (per team) \$70 Weekly Game Fees (per team)	<input type="checkbox"/> PICKLEBALL (Mixed Doubles) Thursdays \$10 Registration Fees (per person) \$7 Weekly Game Fees (per person)

Team Name (If applicable)

Primary/Team Captain Contact Details
Email:
Phone:
Address:
Suburb: Postcode:

Vice-Captain Contact Details (If applicable)
Email:
Phone:
Address:
Suburb: Postcode:

Declaration
<p>I warrant and declare that I have the authority to make this declaration and act accordingly on behalf of the team stated on this form. I declare the team will participate in all scheduled matches for the duration of the season and honour any fines (game fees) that are imposed as a result of the team withdrawing or causing a match to be forfeited.</p> <p>I declare that all players and spectators connected to this team will abide by the Centre's bylaws and Codes of Conducts. I further agree on behalf of the team, to fully indemnify the Town of Port Hedland, and all employees of the Town of Port Hedland, against any claims arising which may be made against them on behalf of this team.</p> <p>I understand that participation in the Port Hedland Leisure programs is undertaken entirely at the team's risk and no liability will be held against the Town of Port Hedland. I understand that unforeseen circumstances may cause scheduled games to be altered or cancelled by the Centre from time to time.</p> <p>I understand that the Town of Port Hedland routinely conducts photography and videography works during programs and all players and spectators connected to this team may appear on camera while on premises, and I consent, on behalf of the team and associated spectators, to the reproduction and use of photographs, videos, audio recordings or a reproduction thereof, either in whole or in part, for any and all advertising, promotional and publicity works conducted by the Town of Port Hedland, without limitation or reservation.</p> <p>Where this declaration refers to the rights and obligations of teams, these rights and obligations shall also apply to individual registrations, read down to the extent necessary to preserve its intended purpose and operation.</p>

Name: _____

Signature: _____

Date: ____/____/____

SOCIAL SPORTS REGISTRATION FORM

TEAM DETAILS



PLAYER DETAILS:

ALL details below must be completed in full before registration can be accepted
Players must play a minimum three (3) games to be considered eligible for finals
All players are required to wear the same-coloured shirt on game day

First Name	Surname	Email Address	Contact Number	Year of Birth (Must be 16+)
1.				
2				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				

Please return your completed registration form to socialsports@porthedland.wa.gov.au