



## Membership 2019

1st January 2019 to 31<sup>st</sup> December 2019

Name: \_\_\_\_\_

D.O.B: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Phone: \_\_\_\_\_ SMS: \_\_\_\_\_

Glide ID: \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_

Age Range:            14-17                        18 and over           

                                 Junior 8-14                        Masters 40+           

**Parent/Guardian: (Participants who are age 17 or under please signed by legal guardian)**

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

### MEMBERSHIP RULES

1. Membership is available to anyone 18 years of age or older.
2. For participants who are age between 14-17 of age, it is important to have a legal guardian/parent must sign on their behalf.
3. All members are to be committed, loyalty and reliable to work with Deaf Netball N.S.W. Inclusive, Netball games, trainings, meeting, fundraising and other events.
4. All individual information are confidential.
5. Agreed to pay \$10.00 per person.

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Please forward this form to [dnnswtreasurer@gmail.com](mailto:dnnswtreasurer@gmail.com) with remittance advice.

Our details are:

Deaf Netball NSW

BSB: 012-209

Account No: 2149-27725

Reference: <Your name> Mship 2018

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Office Use only:

Receipt No:

Date Received: