MSC Membership Number:

Mornington Soccer Club
Dallas Brooks Park,
Mornington-Tyabb Road,
Mornington VIC 3931
P.O. Box 237
Mel. Ref. 145 H3
ABN 85 982 845 259
www.morningtonsc.com.au

JUNIOR REGISTRATION FORM 2018

All fields marked with an * must be completed in full to complete registration

***Players Name**			***Gender:**
***Address**			***Post Code:**
***Home Phone**		***Mobile:**	***D.O.B:**
***Parents Details**			
***Previous TEAM / Club (If Mornington, please state)**			***FFV Number:**
***Doctors Name**			***Doctor's Ph:**
***Emergency Contact Name**			***Emergency Ph:**
*** I can assist in one or more of the following areas (please circle):**	**Team Manager** **Sponsorship** **Fundraising** **Coaching** **Match day Assistance** **Social Committee** **Other:** _____		
Additional Apparel:	**Shirt ($40):**	**Shorts ($30):**	**Socks ($15):**

***Main Parent Contact Email Address**

MEDICAL TREATMENT CONSENT

I, the Registrant, hereby give consent for emergency medical care prescrived by a duly licensed Doctor of Medicine or Dentistry. This care may be given under whatever conditions are necessary for my wellbeing. List any medical condition that you coach needs to know here:

04 February 2018

Signature of Consent Date

RELEASE STATEMENT

I, the registrant, agree that I will abide by the rules, policies and Codes of Conduct of the Mornington Soccer Club and its affiliated organizations (e.g.: FFV). Recognizing the possibility of physical injury associated with soccer and in consideration for Mornington Soccer Club accepting the registrant for its soccer programs and activities I hereby release, discharge and/or otherwise indemnify Mornington Soccer Club, its affiliated organizations, their officers and associated personnel, including the owners of the fields and facilities utilized for the programs, against any claim by or on behalf of the registrant as a result of the registrant's participation in the programs and/or being transported to or from the same, which transportation I hereby authorize. By participating in the Mornington Soccer Clubs programs, I also consent to the Mornington Soccer Club using photographic images in subsequent promotional material

04 February 2018

Signature for Release Date

Office Use only

Payment	Cash: $	EFTPOS: $	Credit Card: $ Visa / MCard	Cheque: $ Name/Details:	Initials:
Data entry	Team:			Date Entered:	Initials: