

# Australian Handball Federation

## Registration Form – Players, Officials and Supporters

### Details

Surname : \_\_\_\_\_ Gender : Male / Female  
Given Names : \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Occupation : \_\_\_\_\_ Nationality : \_\_\_\_\_  
Physical Address : \_\_\_\_\_

State: \_\_\_\_\_ Postcode : \_\_\_\_\_  
Phone Home : \_\_\_\_\_ Mbl: \_\_\_\_\_ Work: \_\_\_\_\_

Email Address : \_\_\_\_\_  
Emergency Contact: Name \_\_\_\_\_ Mbl \_\_\_\_\_ Home \_\_\_\_\_

### Players Details\*

Current Club : \_\_\_\_\_ Registration Number \_\_\_\_\_  
Previous Club : \_\_\_\_\_ Country : \_\_\_\_\_ Clearance : Yes / No  
Previous injuries : Yes / No If 'yes', and not previously advised to AHF, please provide full details (attach an extra sheet if necessary): \_\_\_\_\_

### Officials Details\*

List positions held and performed, including coaching/refereeing accreditation \_\_\_\_\_

Do you hold State Child Safety certification? Yes / No If 'yes', Certification/Card No \_\_\_\_\_

### Supporters Details\*

I am a supporter of the AHF, the \_\_\_\_\_ State Federation and the \_\_\_\_\_ Club

### Declaration

I ..... hereby declare that I fully agree to participate in the AHF and its affiliated state bodies and clubs and to abide by the constitution, rules, by laws, regulations, resolutions and decisions of the AHF, its affiliated state bodies and clubs. I understand and acknowledge that failing to abide by the said constitution, rules, by laws, regulations, resolutions and decisions of the AHF, its affiliated state bodies and clubs, may result in my name being struck off the register of the AHF, its affiliated state bodies and clubs. I also agree that photographic images (still and video) of me may be taken and used by the AHF, its affiliated state bodies and clubs, for the bona fide purposes of the AHF, its affiliated state bodies and clubs, in the promotion of handball.

**Any person who is under the age of 18 years must have parental/guardian consent.**

Player Signature: \_\_\_\_\_ Date : \_\_\_\_\_

Parent or Guardian if applicable: \_\_\_\_\_ Date : \_\_\_\_\_

Witness Signature: \_\_\_\_\_ Date : \_\_\_\_\_

*\* You may register as a player and/or an official and/or a supporter. If registering only as an official and/or a supporter, reduced registration fees apply.*

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(Authorised use only)

### AHF REGISTRATION CARD

This is to certify that \_\_\_\_\_  
is Registered Member No \_\_\_\_\_ of the AHF in  
the State of \_\_\_\_\_, with the \_\_\_\_\_  
\_\_\_\_\_ Club for the year 20....

.....  
Authorised Officer, AHF  
Date.....