



## GIRLS AND WOMENS'S MEMBERSHIP APPLICATION FORM 2009

**NAME OF CLUB:** \_\_\_\_\_

**NAME OF TEAM:** \_\_\_\_\_

**CLUB ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_ **WEBSITE:** \_\_\_\_\_

### GROUNDS.

**Number of pitches available on any match day:**

**Main Pitch:** \_\_\_\_\_

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

\_\_\_\_\_

**Pitch 2:** \_\_\_\_\_

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

\_\_\_\_\_

**CLUB OFFICERS.**

**CHAIRPERSON:**

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**Address:**

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**Telephone:**

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 (wk) \_\_\_\_\_ (hm)

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 (mb) \_\_\_\_\_ (fax)

**E-mail Address:**

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**SECRETARY:**

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**Address:**

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**Telephone:**

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 (wk) \_\_\_\_\_ (hm)

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 (mb) \_\_\_\_\_ (fax)

**E-mail Address:**

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**TREASURER:**

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**Address:**

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**Telephone:**

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 (wk) \_\_\_\_\_ (hm)

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 (mb) \_\_\_\_\_ (fax)

**E-mail Address:**

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**CLUB DELEGATE:**

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**Address:**

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**Telephone:**

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 (wk) \_\_\_\_\_ (hm)

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 (mb) \_\_\_\_\_ (fax)

**E-mail Address:** \_\_\_\_\_

**Address for all Correspondence:**

All correspondence sent from the office will be forwarded to clubs via e-mail. Clubs must nominate a minimum of two people who will receive this information on behalf of the club.

**Please ensure that you clearly print the e-mail address and that the e-mail address is accurate.**

**1. Name:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**2. Name:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**3. Name:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Authority to Sign**

Please fill out the table below nominating a minimum of two people who will have the authority to sign documents on behalf of your club. Please ensure that you nominate the correct people from within your club as they will be the only ones recognised and accepted as having authority to sign any documents on behalf of your club.

The people nominated below will have the authority to sign such documents as Registration Forms, and any correspondence to the federation. The federation will not accept any documents that are not signed by a person outlined below.

<b>Name of Person (Please print name clearly)</b>	<b>Position Held within the Club</b>	<b>Signature</b>


**Affiliation of Teams**

**Number of Teams Affiliating:** \_\_\_\_\_

**Prem. Div:**     **Div 1:**     **Div 2:**     **Div 3:**     **Div 4:**     **Div 5:**

**U/17 Div:**     **U/15 Div:**     **U/13 Div:**     **U/11 Div:**     **U/9 Div:**

\* Under 9 will be a seven-a-side competition and Under 11 will be a 9-a-side competition. Format and dimensions of the field are in accordance with the FFA Small-Sided Games.

**\*\*NB: Nomination into a particular league is subject to criteria and placement availability.**

**CLUB COLOURS:**                      Please ensure that the colours that you stipulate apply to all nominated teams. (All teams must nominate and have available an alternative away strip)

**Home Strip:**                      Shirt:                                      Shorts:                                      Socks :

**Alternate Strip:**                      Shirt:                                      Shorts:                                      Socks:

**Please attach additional information if these colours do not apply to all affiliated teams.**

**HOME KICK OFF TIME:**

Please note that in line with the Rules and Regulations, all Premier Division Games will kick-off at 3.00pm and their second open age team will kick-off at 1.00pm. All Division One Games will kick-off at 1.00pm. All other teams may nominate kick-off times ensuring that the highest grade team is the last team to be played on the day.

**Prem. Div:**                      **Res Div:**                                      **Div 1:**                                      **Div 2:**  
**Div 3:**                      **U/17 Div:**                                      **U/15 Div:**                                      **U/13 Div:**  
**U/11Div:**                      **U/9 Div:**

All coaches appointed to positions within clubs must be qualified and hold the appropriate level of coaching qualification as outlined below:

<b>COMPETITION</b>	<b>COACHING LICENCE REQUIRED 2009</b>
<b>Premier Division</b>	Senior Preferred
<b>Division One</b>	Youth
<b>All Other Open Age Divisions</b>	Junior
<b>Under Age Divisions</b>	Youth Preferred

**HEAD COACH:**

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

**Telephone:** \_\_\_\_\_ (wk) \_\_\_\_\_ (hm)  
\_\_\_\_\_ (mb) \_\_\_\_\_ (fax)

**E-mail Address:** \_\_\_\_\_

**Coaching Qualifications:** \_\_\_\_\_

**OTHER CLUB COACHES:**

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

**Telephone:** \_\_\_\_\_ (wk) \_\_\_\_\_ (hm)  
\_\_\_\_\_ (mb) \_\_\_\_\_ (fax)

**E-mail Address:** \_\_\_\_\_

**Coaching Qualifications:** \_\_\_\_\_

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

**Telephone:** \_\_\_\_\_ (wk) \_\_\_\_\_ (hm)  
\_\_\_\_\_ (mb) \_\_\_\_\_ (fax)

**E-mail Address:** \_\_\_\_\_

**Coaching Qualifications:** \_\_\_\_\_

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

**Telephone:** \_\_\_\_\_(wk) \_\_\_\_\_(hm)  
\_\_\_\_\_ (mb) \_\_\_\_\_(fax)

**E-mail Address:** \_\_\_\_\_

**Coaching  
Qualifications:** \_\_\_\_\_

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

**Telephone:** \_\_\_\_\_(wk) \_\_\_\_\_(hm)  
\_\_\_\_\_ (mb) \_\_\_\_\_(fax)

**E-mail Address:** \_\_\_\_\_

**Coaching  
Qualifications:** \_\_\_\_\_

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

**Telephone:** \_\_\_\_\_(wk) \_\_\_\_\_(hm)  
\_\_\_\_\_ (mb) \_\_\_\_\_(fax)

**E-mail Address:** \_\_\_\_\_

**Coaching  
Qualifications:** \_\_\_\_\_

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

**Telephone:** \_\_\_\_\_(wk) \_\_\_\_\_(hm)  
\_\_\_\_\_ (mb) \_\_\_\_\_(fax)

**E-mail Address:** \_\_\_\_\_

**Coaching**

**Qualifications:** \_\_\_\_\_

**Please attach additional information if insufficient space is provided.**

## **FEES FOR 2009**

**Affiliation Fee:** \$200.00 for the first team  
\$150.00 for all subsequent teams

**Bond Fee:** \$200.00 for the first team  
\$100.00 for all subsequent teams

**Player Registration Fees**

**Senior:** \$115.00

**Concession:** \$105.00

**Juniors (17 and Under):** \$ 95.00

**Under 13 Team  
Registration:** \$700.00 per team

**Under 9 &11 Team  
Registration:** \$400.00 per team

All fees include the FFA National Registration Fee and Player Insurance.

**This application is to be completed and returned to the FFSA office no later than February 28<sup>th</sup> 2009.**

### **DECLARATION.**

We the undersigned hereby agree that all of the information contained in this application is true and correct (please ensure that this form is signed by 2 authorised officials).

We agree that the club, its officers, members, players, volunteers and employees will at all times abide by the constitution and rules and regulations of the Football Federation of Australia and Football Federation SA.

**1. NAME:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**2. NAME:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_