



Weston Indoor Sports – Junior Rebound Soccer

Individual Registration form for

2022-23 SUMMER Season

Registration

- Email: soccer@westonis.com.au (PDF, scanned or high-quality image)
- Post or deliver to Weston Indoor Sports, 45 Liardet St. Weston 2611
- Easy online registration is also available at our website westonis.com.au

Player	Given Name	Surname	Date of Birth	Age turning in 2022	M/F	School
			/ /			

Team	This year's Team (If known)		Last year's Team (if played last year)	
	Players you want in your team		Name of Coach	
			Are your parents interested in coaching or managing this team Yes / No	

Contact	Have you previously played Rebound Soccer here in the past 3 years? Yes/No			
	Address		Suburb	
			Postcode	
	Parent 1 Name		Phone	
	Email			
	Parent 2 Name		Phone	
	Email			
Where did you hear about our Rebound Soccer?				

Indemnity: I consent to my son/daughter playing indoor soccer at Weston Indoor Sports. I understand that Weston Indoor Sports will not be liable for any injury sustained when playing at this venue. I authorise any officer(s) of Weston Indoor Sports to seek medical treatment or assistance for my son/daughter in the event of injury and agree to pay any fees and expenses incurred as a result. I agree that officers of Weston Indoor Sports are not responsible for any supervision or custody of my son/daughter beyond that period immediately connected with his/her participation in a game organised by Weston Indoor Sports.

Signature (Parent/Guardian): _____ **Date** _____

Playing fees \$195 per player - \$10 discount per child if two or more register from the same family.

Fees can be paid:

- | | |
|---|--|
| <ul style="list-style-type: none"> • At Weston Indoor Sports by cash or EFT. | <ul style="list-style-type: none"> • By direct debit to: <p>Account Name: Indoor Sports ACT
 Bank: Westpac
 BSB: 032-761
 Account: 340372
 Reference: <u>Player's surname, first name</u></p> |
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Need more information? Visit westonis.com.au, or contact the Junior Rebound team at soccer@westonis.com.au or on 6288 0444.

Officials to fill out

Date: _____ Staff Name: _____ Receipt Number: _____
 DD/Cash/EFT \$ _____