



REGISTRATION OF AN OFFICIAL

Please note that when filling out this form all fields are mandatory

FOR THIS FORM TO PROCEED IT MUST BE TYPED OR BLOCK PRINTED AND RETURNED TO FOOTBALL NSW WITH A COLOUR PASSPORT PHOTO. ALL OFFICIALS MUST PROVIDE PROOF OF ID (ie. Government Issued Photo ID, Drivers Licence, Passport or RTA Proof of Age Card)

To: Competition Manager
Football NSW
PO Box 6146, Baulkham Hills
Business Centre NSW 2153
Phone: 8814 4400
Fax: 8814 4483

We, the undersigned Club and Official, whose details appear below, hereby desire to register the said person with Football NSW Limited as an OFFICIAL with

CLUB DETAILS IN FULL:

Full Club Name	Full Division Title	Grade

Official position held with club/team	
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OFFICIALS DETAILS IN FULL:

Surname	Given Names

Address	Suburb	Postcode

Business Phone	Home Phone	Mobile Phone

Fax No.	E-mail Address

Country of Birth	Date of Birth	Resident Status
		<i>(Aust Citizen, Permanent Resident or Temporary Visa)</i>

Full Name of Previous Club (most recent)	

Are you currently under suspension	YES/NO

Do you currently hold a First Aid Certificate	YES/NO

CHILD PROTECTION

Have you completed a Working with Children declaration form	YES/NO
Did you attend one of our seminars	YES/NO
Did you complete the course online	YES/NO (If <u>YES</u> attach copy of certificate)

Signature of Club Official

____/____/____
Date

Signature of Club Secretary

____/____/____
Date

FOR FOOTBALL NSW LIMITED OFFICE USE

INVOICE	NEW ID	DATE	SIGNED

OFFICIAL DECLARATION . READ CAREFULLY

I hereby consent to perform the duties of an Official under the jurisdiction and for Football NSW Limited as a registered Official. I acknowledge that, if this application is accepted it shall be in respect of the 20__ season only and that a further application must be made in respect of any subsequent season.

I acknowledge and agree that the information provided on the form is current and correct and if this application is accepted by Football NSW Limited I will comply with Football NSW By-Laws and Regulations, FFA Statutes, including the National Registration Regulations, Code of Conduct, Disciplinary Regulations and Grievance Resolution Regulations, copies are available on www.footballaustralia.co.au or on request;

I am privately health insured with _____

PLEASE NOTE THAT MEDICARE IS NOT A PRIVATE HEALTH INSURER.

PRIVATE HEALTH FUND

DISCLAIMER STATEMENT

I _____ a registered Official with the _____

Football Club advise that I am not a member of a Private Medical Fund.

I further advise that in the event of an injury sustained by me, the Club, Association and Football NSW is hereby indemnified

against any action by me to recover any medical costs not covered by the standard

Personal Accident Insurance Policy provided through the FOOTBALL NSW LIMITED

HEALTH STATEMENT

The official undertakes that upon becoming aware that they are or is reasonably likely to be, pregnant or suffering any illness, injury or other ailment, they will notify Club/Association (_____) (as appropriate and, where practicable, in writing) of the details of that pregnancy, illness, injury or other ailment.

SIGNED: DATE: ð õ .

SIGNED BY PARENT: ð õ .
OR GUARDIAN IF UNDER 18

Signed: _____ Date: _____