



# NORTHERN DISTRICT HOCKEY ASSOCIATION INC.



## WOMENS' REGISTRATION FORM – 2008

Surname: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Postcode: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email (for club communications): \_\_\_\_\_

Has the address changed since last registration? Yes / No / First Registration

Date of Birth: \_\_ / \_\_ / \_\_\_\_

School (Under18 only): \_\_\_\_\_

Player History: Beginner / Played with \_\_\_\_\_ Club in Div: \_\_\_\_\_ Year: \_\_\_\_\_

Please indicate your level of commitment for the 2008 season (please tick one).

NDHA is run by players and other volunteers. Please indicate how you could assist us in 2008:

- |   |   |
|---|---|
| <input type="checkbox"/> Coach  | <input type="checkbox"/> Assistance organising a social event or completing a small administrative task |
| <input type="checkbox"/> Team Manager (no hockey experience required)                     | <input type="checkbox"/> Coaching Assistant   |
| <input type="checkbox"/> Results Officer (no hockey experience required, must have email) | <input type="checkbox"/> Umpiring   |
| <input type="checkbox"/> Donation of a prize for club raffles                             | <input type="checkbox"/> Other, Please Specify _____  |

Do you have a current First Aid Certificate? Yes/No

Do you have a trade or business that you would like to advertise through NDHA? Yes/No

Any sponsorship inquiries please see NDHA club president.

I hereby consent to the player named above playing hockey with Northern District Hockey Association Inc. I understand that the Association will not be held responsible for any injuries or sickness sustained whilst involved in the activities of the Club. I understand that an U18 player is unable to take the field for training or games without a mouth guard and shin pads (as per NSW Hockey Association Directives for all under 18 players). I acknowledge that team and/or game photos depicting the player may be posted on the NDHA website and that our email details may be used for promotional purposes.

Players Signature \_\_\_\_\_

2008 Fees (please tick applicable)

- Under 18 Girl \$180 (playing Juniors and U18)
- Under 18 Women's \$240 (Sunday only)
- Over 18 Women's \$310.00

+ Fundraising Levy is \$30 per family

The club reserves the right to suspend registration of non-financial Members. This is due to NSW Hockey Players Insurance being null and void if registration remains unpaid.

Players Fees Payment Terms

50% on Registration Balance no later than 31/05/2008

### \*Office Use Only\*

Cheque      Credit Card      Cash

Rec#: \_\_\_\_\_

Date: \_\_ / \_\_ / \_\_\_\_

NDHA official: \_\_\_\_\_



# NORTHERN DISTRICT HOCKEY ASSOCIATION INC.



## MEDICAL FORM - 2008

### PERSONAL DETAILS (please print)

Surname: \_\_\_\_\_ Given Name: \_\_\_\_\_

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

Postcode: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Date of Birth: \_\_ / \_\_ / \_\_\_\_ Medicare Number \_\_\_\_\_

Private Health Fund? YES/NO Do you have ambulance cover? YES/NO

Name of Fund \_\_\_\_\_ Membership No \_\_\_\_\_

Mothers Name \_\_\_\_\_ Mobile Number \_\_\_\_\_

Fathers Name \_\_\_\_\_ Mobile Number \_\_\_\_\_

**HEALTH STATEMENT (please fill in accurately):** If you suffer ANY chronic or recurrent ailment, allergy or physical defect, it should be disclosed in order that provision may be made for your child's welfare. If during the season anything changes in your medical profile, please notify the club.

Medical Condition	(circle)	Further Information
Asthma	YES/NO	
Allergies	YES/NO	
Diabetes	YES/NO	
Epilepsy	YES/NO	
Hearing Impairment	YES/NO	
Dizzy/Fainting Spells	YES/NO	
Heart Condition	YES/NO	
Other medical conditions not listed	YES/NO	

Will you be taking any medication to games and carnivals? YES/NO

Please list below TWO persons who may be contacted in case of an emergency:

Name \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Phone \_\_\_\_\_

### Parent(s) or Guardian(s), Player(s) Consent

I, \_\_\_\_\_ Hereby give \_\_\_\_\_

permission to attend games and fixtures required by Northern District Hockey Association Inc. In the event of any accident or illness, I authorize the obtaining on my behalf such medical assistance as required. I also consent to being admitted to hospital if deemed necessary in the event that I cannot be contacted or an emergency arises. I undertake to pay medical fees and/or cost of drugs and/or cost of transport seeking medical assistance, which may be incurred while under medical care.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian/Player

Signed \_\_\_\_\_ Date \_\_\_\_\_

NDHA Representative



# NORTHERN DISTRICT HOCKEY ASSOCIATION INC.



## CODE OF BEHAVIOUR AND COMMITMENT STATEMENT - 2008

### Code of Behaviour

- Wear your uniform with pride.
- Play by the rules.
- Never argue with an official. If you disagree, have your captain; coach or manager approach the official during a break or after the competition.
- Control your temper. Verbal or physical abuse of officials or other players, deliberately distracting or provoking an opponent is not acceptable or permitted in any sport.
- Work equally hard for yourself and your team. Your team's performance will benefit and so will you.
- Be a good sport. Acknowledge all good plays whether they are by your team or the opposition.
- Treat all players as you would like to be treated. Do not interfere with, bully or take unfair advantage of another player.
- Co-operate with your coach, team-mates and opponents. Without them there would be no competition.
- Play for the fun of it, and not just to please parents and coaches.
- Sporting equipment should not be used inappropriately or as a weapon.
- No playing around the perimeter of a field while a game is in progress.
- No playing around spectators or on the concreted areas.
- Make visiting teams welcome.

THIS CODE OF BEHAVIOUR HAS BEEN DEvised FOR YOUR ENJOYMENT OF YOUR HOCKEY GAME AND THE SAFETY OF ALL CONCERNED. SHOULD YOU NOT PARTICIPATE IN THE SPIRIT OF THIS CODE YOU COULD BE EXCLUDED FROM PLAY.

### Commitment Statement

- Players are expected to commit for the full season including finals.
- Commitment to your team includes training and competition matches.
- Any inability to attend either training or competition matches **MUST** inform both **Coach** and **Manager** as soon as the date is available
- Players that do not show NDHA the level of commitment required for the season can be dropped from the team. This is at the discretion of the Team Coach/Club. Any player removed from a team will not receive a refund of their fees.

### Code of Behaviour and Club Commitment

We have read the above statements and agree to abide by the expected levels of behaviour showing full commitment to NDHA for the duration of the season.

Players Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parents Signature: \_\_\_\_\_ Date: \_\_\_\_\_