



Caringbah Redbacks Football Club Inc.

North Caringbah Oval - Dianella Street Caringbah

REDBACKS SUMMER 7's COMPETITION PLAYER REGISTRATION FORM

Team Name	
Team Manager	

Division

Tick Box

Women Division One	WEDNESDAY NIGHT	<input type="checkbox"/>
Women Division Two	WEDNESDAY NIGHT	<input type="checkbox"/>
Men Division One	THURSDAY NIGHT	<input type="checkbox"/>
Men Division Two	THURSDAY NIGHT	<input type="checkbox"/>
Mixed Division	WEDNESDAY NIGHT	<input type="checkbox"/>

Player Details

Surname	
First Name	
Date of Birth	
Home Address	
Suburb	
Postcode	
Email	
Home Phone	
Work Phone	
Mobile Phone	

I agree to be bound by the Rules and Regulations & Code of Conduct of Caringbah Redbacks Football Club Inc. for the Redbacks Summer 7's Competition in 2010.

Player Signature

Parent/Guardian Signature (if player under 18 years of age)