

## TEAM REGISTRATION FORM

Please email completed form to: [enquiries@bankstowncommunityfootball.com.au](mailto:enquiries@bankstowncommunityfootball.com.au)

<b>Team name:</b>		<b>Age Group/Division:</b>	
<b>Mangers name:</b>		<b>Team colours/style:</b>	
<b>Phone number:</b>		<b>Email:</b>	

Team Members Names:

	Given name	Surname	Address	DOB	Email address	Contact number
1						
2						
3						
4						
5						
6						
7						
8						

<b>Name:</b>	<b>Signature:</b>	<b>Date:</b>
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**REGISTRATION FEE PAYMENT DETAILS:**  
**ACC NAME:** Bankstown Community Football  
**BSB:** 012 209 **ACC NUMBER :** 2220 50601  
**REF DETAILS:** (team managers full name)  
*\*Payments can also be made in cash.*

Tick box if you consent to Bankstown Community Football staff taking pictures and videos of games for promotional purposes.