



2018 REGISTRATION FORM

Name:

Address:

Date of birth:/...../..... Home phone: Cellphone:

E-mail address:

Parent/Caregiver names (if U18):

Parent/Caregiver E-mail address (if U18):

I would like to renew my membership join the Club as a JDS U14 U16 U18 U20 Senior

Member for the 2018 season (tick which is applicable) Please use available credit in my account towards my subscription

SUBSCRIPTION OPTIONS:		
Annual subscription	<input type="checkbox"/>	\$425 annually (includes NZWP registration fee of \$25.00)
Pay by term basis	<input type="checkbox"/>	\$150 per term (plus one off NZWP registration fee of \$25.00)
JDS for full year	<input type="checkbox"/>	\$240 annually (plus one off NZWP registration fee of \$25.00)
JDS pay by term basis	<input type="checkbox"/>	\$75 per term (plus one off NZWP registration fee of \$25.00)
Senior/National league player (minimum of two terms)	<input type="checkbox"/>	\$300 for 2 terms (plus one off NZWP registration fee of \$25.00)
Out of Town members	<input type="checkbox"/>	\$75 (includes NZWP registration fee of \$25.00)

Subscriptions include admission to Naenae Pool for normal weekly training sessions. Subscriptions do not include specific tournament related expenses.

PAYMENT OF SUBSCRIPTIONS:

Please complete this Registration Form and email to treasurer@huttwaterpolo.org.nz.

Payments to be made direct to Westpac **03-0531-0622204-00** (include your name as reference)

Subscriptions can also be paid by monthly automatic payments

I have read and agree to abide by various "Standard Documents" published on the Club's web page www.huttwaterpolo.org.nz including **Code of Conduct, Team Selection Process** and **Game Time Guidelines**

I agree to be responsible for any debts incurred through my membership of the Hutt Water Polo Club and any tournament participation.

Health & Safety Notice: If you incur any injury at Naenae Pool during club training times, you must report this to the Pool Staff immediately.

If you suffer from a medical condition (*i.e. asthma, epilepsy, ADHD, deafness*) that may affect or interfere with your participation in water polo, please notify the Chairperson in writing to chairperson@huttwaterpolo.org.nz immediately.

In terms of the Privacy Act 1993, I consent to the collection of the above details by the Hutt Water Polo Club Inc for the purpose of club records, and this information to be retained, used and disclosed to WWPC and NZWP. I acknowledge my rights to have access to and to correct this information.

Member's signature: Date:/...../.....

Parent/Caregiver's signature (if U18 years of age on 01/01/18):