

2010 VOLLEYBALL VICTORIA MEMBERSHIP

Post: Volleyball Victoria, State Volleyball Centre, 270 Stud Road, Dandenong North, VIC 3175

Phone: 03 9794 0009 Fax: 03 9794 6006 Email: admin@volleyballvictoria.com.au

ABN: 65 891 207 995 – This form is a Tax Invoice when completed



Title: _____

First Name: _____

Last Name: _____

Date of Birth: ____ / ____ / ____

Gender (circle): _____ Female / Male

Address: _____

Suburb: _____

Postcode: _____ State: _____

Home Phone: _____

Work Phone: _____

Mobile: _____

Email: _____

VV Membership No. (if known): _____

Please tick this box if you do not wish to receive promotional material or information from Volleyball Victoria, Volleyball Australia or third parties.

PLEASE COMPLETE FORM IN FULL

I am a Player: YES NO

Club: _____

Association: _____

School: _____

Name of Team: _____

I am a Coach: YES NO

Coach Qualification: _____

Coach Expiry: _____

Coach ID: _____

I am a Referee: YES NO

Referee Qualification: _____

Referee Expiry: _____

Referee ID: _____

Membership Category	Cost	Membership Category	Cost
Full Adult	\$67	Recreational	\$10
Full U/19	\$42	Single Event	\$30
Social Adult	\$52	All memberships include GST	

I acknowledge that I have read, understood and agree to the Volleyball Victoria Membership Declaration, as set out on the Volleyball Victoria website (www.volleyballvictoria.com.au) and/or provided to me at the time of application, including the warning, exclusion of liability, release and indemnity. I acknowledge that if my application for membership is successful I will be entitled to all benefits, advantages and services of Volleyball Victoria Membership.

Signed: _____ Date: _____

Name: _____

Where the applicant is under 18 years of age, this form must also be signed by the applicant's parent or legal guardian:

I, _____, am the parent or guardian of the applicant. I expressly agree to be responsible for the applicant's behaviour and agree to personally accept the conditions set out in this membership application and declaration including the provision by me of a release and indemnity in the terms set out on the Volleyball Victoria website (www.volleyballvictoria.com.au) or at the time of this application.

Clubs, Associations and Schools will be invoiced for membership applications.

Individuals cannot be invoiced and payment must be made at the time of application, via Credit Card below, Cheque (made out to Volleyball Victoria), or EFT facilities if present at the time of application.

Credit Card Payment – Visa / Mastercard (circle)

Card No: _____ / _____ / _____

Expiry: _____

Name on card: _____ Signature: _____