



# MEMBERSHIP FORM 2009

Please return to: NHISC 2/43 Luke St, Otahuhu, Auckland

**To be completed by ONE member per Household,**

**Total Membership Fee is \$20**

<b>NAME:</b>	
FIRST:	LAST:
<b>ADDRESS:</b>	
STREET:	
SUBURB:	
CITY:	
<b>PHONE:</b>	
HOME:	WORK:
MOBILE:	FAX:
<b>EMAIL:</b>	<input type="checkbox"/> Please tick if you prefer correspondence sent via email
<b>OCCUPATION:</b>	<b>DATE OF BIRTH:</b>
	/ / 19

## **PLAYING MEMBERS**

The information you state below will be held by your coach and manager for use in the case of an emergency. If you **do not** want this information held by these members, please leave this section blank.

DO YOU HAVE ANY **MEDICAL CONDITIONS** THE CLUB SHOULD BE AWARE OF?

YES	NO
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IF 'YES' PLEASE STATE BELOW:


## **NEXT OF KIN (TO CONTACT IN AN EMERGENCY):**

NAME:
PHONE NUMBER:
RELATIONSHIP TO MEMBER:

**Please turn over...**

The address and phone details provided will be used for the NHISC Members Roll Book. Please tick the box if you do not want these details to be distributed.

## **HOUSEHOLD MEMBERSHIP**

My cheque is enclosed (Please do NOT post cash through the mail)

Cash, Please Hand to any Committee members, Print Name \_\_\_\_\_ Signature \_\_\_\_\_

I wish to make a further donation of \$ \_\_\_\_\_

Please list **all** members of the household included in this membership:

	Full Name	Tick if over 18?	Occupation	Date of Birth	Email address (Optional)	Correspondence preferred via email
1	_____	<input type="checkbox"/>	_____	__/__/__	_____	<input type="checkbox"/>
2	_____	<input type="checkbox"/>	_____	__/__/__	_____	<input type="checkbox"/>
3	_____	<input type="checkbox"/>	_____	__/__/__	_____	<input type="checkbox"/>
4	_____	<input type="checkbox"/>	_____	__/__/__	_____	<input type="checkbox"/>
5	_____	<input type="checkbox"/>	_____	__/__/__	_____	<input type="checkbox"/>
6	_____	<input type="checkbox"/>	_____	__/__/__	_____	<input type="checkbox"/>

## **MEMBERS AGREEMENT AND RELEASE**

I hereby request approval (or renewal) for membership into the North Harbour Indian Sports Club Incorporated.

I understand that this application is subject to approval from the Executive Committee.

As a member of the North Harbour Indian Sports Club Incorporated (NHISC), I will take personal responsibility for my conduct and agree to abide by the rules contained within the NHISC Rules (a copy can be obtained upon requested or may be viewed at [www.nhisc.org.nz](http://www.nhisc.org.nz)).

I will refrain from any form of discrimination, harassment, derogatory, illegal or unethical conduct, and I understand that if I engage in such conduct, I may be subject to disciplinary action or to reimburse NHISC, or other individual's involved, for any damages, losses or costs resulting from my conduct.

If you register for a team you may be liable for full fees. I understand that non-payment of any dues may result in the termination of my membership and further action will be taken.

I have read and understood the player pool agreement and agree to abide by these conditions.

Signed: \_\_\_\_\_

Dated:        /        /2009