



**PERTH POOL LEAGUES**

88 Centre Street, Queens Park WA 6107

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**MEMBER PERSONAL DETAILS --- FORM**

#### Details Form to be completed and handed in or emailed to [wa8ballfed@gmail.com](mailto:wa8ballfed@gmail.com) before start of league####

**ANY QUERIES CONTACT – TERRY GREEN 0419 777 510**

**Personal Details**

Full Name:	Mobile:		
Preferred Name:			
Country of Birth			
Date of Birth	Gender :	Male	Female
WAEBF has an Aboriginal Engagement Strategy as part of our diversity and inclusion approach to engagement of players. This question is optional and simply seeks to gather information relevant to our strategy.			
Are you of Aboriginal or Torres Strait Islander Descent (optional)?			
YES NO Prefer not to answer			

**Contact Details**

Residential Address			
Suburb / Town	Post Code		
Email			

**Primary Next of Kin / Emergency Contact Detail**

Name :	Relationship :	
Address:		
Mobile Phone :	Home Phone :	

**Do you have any medical issues we should know about**

If so please elaborate	:	
Medical practitioner we should call		

NAME : \_\_\_\_\_ MEMBER NO: \_\_\_\_\_

SIGN: \_\_\_\_\_

DATE: \_\_\_\_\_