



[ORGANISATION/CLUB NAME]

[DATE]

[POSTAL ADDRESS]

[PHONE: XXXX XXXX]

[ABN XX XXX XXX]

DETAILS OF SEASON AND TEAM	
Season	
Child/Player Name:	
Child/Player Date of Birth	
Team Name	
Competition (if applicable)	
Division/Grade (if applicable)	

CONTACT DETAILS	
Parent/Guardian Name:	
Parent/Guardian Phone:	
Parent/Guardian E-mail:	

PAYMENT DETAILS	
Card Number	
Cardholder Name	
Expiry Date	
Signature	

PAYMENT PLAN DETAILS		
Plan Details	Description	Amounts
Initial Payment on [DATE] and [FREQUENCY] payments made via [PAYMENT METHOD]	<i>E.g. 2021 Junior registration fees initial payment</i>	\$25.00
	<i>E.g. 6 x monthly payments at \$25.00 each</i>	\$150.00
	TOTAL	\$175.00

ORGANISATION/CLUB REPRESENTATIVE NAME	ROLE	SIGNATURE



SPORT AND RECREATION VICTORIA

Department of Jobs, Precincts and Regions

121 Exhibition Street, Melbourne VIC 3000
GPO Box 4509, Melbourne VIC 3001

W: getactive.vic.gov.au | E: getactivekids@sport.vic.gov.au