



Please check all information and use BLOCK LETTERS to change details. All information is kept confidential.

Have you previously been registered with Research/Lower Plenty Baseball Club  YES /  NO

\*\*\*All new players must provide a copy of their birth certificate.\*\*\*

**Given Names** : ..... **Surname** : .....

**DOB** : ..... **School** : .....

**Address** : .....

**Suburb** : ..... **P/ code**:..... **Home no**:.....

**Parent (1)** : ..... **Parent (2)** .....

**Mobile (1)** : ..... **Mobile (2)** .....

**Email (1)** : ..... **Email (2)** .....

**How did you hear about our club:** .....

**Are you available to assist as a Team Manager / Scorer / Assistant Coach**  
(please circle which role you would like to learn more about)

*(private and confidential)*

**Medical Conditions** .....

*(if any please advise):* .....

**Previous team** *(if any):* .....

**DISCLAIMER:** I give permission for Research/Lower Plenty Baseball Club to take and publish photos of my child for team newsletter or for publicity purposes. By signing this form I also accept the terms of membership of Research Lower Plenty Baseball Club and agree to abide by the clubs by-laws Policies and Parents Code of Conduct

**PRIVACY POLICY:** Your privacy is respected by us. Then information you provide on this form will be used to provide services for you and for the purposes of registration, participation, team selection and insurance. It will be passed onto the Australian Baseball Federation (ABF) and to the ABF's insurer. Your information may also be shared with organizations associated with the sport of baseball including, but not limited to, the Australian Sports Commission and Australian Sports Drug Agency. We and the ABF may at times ascertain whether or not it has services or products which may foreseeably meet your needs and notify you about these. We will not however, share your personal contact details with any third party for their commercial use. If you do not provide the information we may not be able to register you as a member. We and the ABF comply with the Privacy Act with respect to the collection, storage and security of your personal details. If you have any privacy concerns or would like to verify any information we hold about you, please contact our privacy officer.

**RISK WARNING:** You should be aware that there are risks of injury associated with playing baseball, as there are with most sports. Risks will arise in the context of the activities of batting, pitching, catching and running. While we aim to minimise risks, it is not possible to eliminate them all

**Parent/Guardian Signature:**..... **Date:** .....

Please tick

**Fees:**  Junior **\$130.00**     Junior/Senior **\$160.00**     RLPBC player top **\$20.00** (hire)  
*Please note Full payment is required by 4<sup>th</sup> game. Payment plans are possible with prior arrangement.*

Payment can be made to: **Research Lower Plenty Baseball Club**  
BSB: 633 108  
Account no: 1414 26064 *(Please add your name if paying by EFT)*

Players must also register with Baseball Victoria for Insurance purposes. Children cannot play until your child is registered and paid. Refer to our Information Sheet, located on our website, for further detail.

Payment made by  EFT /  Cheque /  Cash *Please make cheques payable to: Research/Lower Plenty Baseball Club*

Player top No : ..... Receipt Number : .....