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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***In addition to the Braves Baseball Club Registration Agreement, you MUST complete the***  ***Baseball WA Registration form or the BWA Junior Registration Form (whichever is applicable).*** | | | | | | | | | | | |
| **Player Personal Information Emergency / Medical Details** | | | | | | | | | | | |
| **Emergency Contact Name** | | |  | | | | | | | | |
| **Contact Number** | | |  | | | | | | | | |
| **Medical Conditions and or information that the club needs to be aware of** **(e.g. asthma, epilepsy), please indicate below:** | | | | | | | | | | | |
|  | | | | | | | | | | | |
| **Volunteer Positions - Please help support the club. Please indicate below by placing an ‘x’ alongside your preferred option.**  **Any time you can spare is greatly appreciated!** | | | | | | | | | | | |
| **Club Volunteer** | Coach | | |  | Scorer | |  | Canteen |  | Social Committee |  |
| Assistant Coach | | |  | Team Manager | |  | Committee Assistant |  | Other |  |
| Medical | | |  | Umpire | |  |  |  |  |  |
| **Fees and Payment methods** | | | | | | | | | | | |
| State League 1, 2 and 3 | | | | $480 | | **DISCOUNT**: Any family with 2 or more registered children, playing for the Braves, will receive a 10% discount of the total fees payable *(excluding uniform fees*).  **Note – LL and JL players will be loaned a playing top, all other grades must purchase their own playing top. The club can assist reselling old playing tops please see the uniform coordinator.** | | | | | |
| Other Senior Grades including Women's | | | | $440 | |
| Big League | | | | $350 | |
| Senior League | | | | $350 | |
| Junior League | | | | $350 | |
| Little League | | | | $300 | |
| Social Member | | | | $50 | |
| PLEASE NOTE:- *All fees paid in full prior to 31st of October, will see you eligible to receive a $50 raffle ticket book with the chance of winning cash prizes.* | | | | | | | | | | | |
| All fees must be paid in full or the player must be signed up to an approved Ezidebit plan prior to the first game of the season. Under BWA and BA guideline the player is not eligible to play any fixture if they are not financial. | | | | | | | | | | | |
| **Payment Option 1:** | | Cash or Card Payment | | | | | | | | | |
| **Payment Option 2:** | | Electronic Funds Transfer (EFT) | | | | Payment can be made to:  Braves Baseball Club of Melville City Inc. Commonwealth Bank Palmyra,  **BSB 066-121, A/C No 00911019** *(Please remember to put your name as the reference for the EFT payments)* | | | | | |
| **Payment Option 3:** | | Cheque payments | | | |  | | | | | |
| **Payment Option 4:** | | FIFO or Shift Worker | | | | The **minimum** amount payable for a player who is a FIFO or shift worker, who is unable to be present to play every game of the Season, will be a $150 registration fee, with a $20 game fee for each game played. Charges are capped so that the maximum amount paid is equal to the Season's grade fees | | | | | |
| **Payment Option 5:** | | EZIDEBIT Payment | | | | Payment plan with payments debited from a credit card or bank account. Ezidebit payments must be paid in full prior to 31st December 2018. *Players must be signed up to an approved Ezidebit plan prior to the first game, if full payment is not received prior to this date the player will not be permitted to play further games until full payment is received*. | | | | | |

**Outstanding Debt: *If you owe money to the club from the previous season, you are required to pay this balance in full before***

***we can accept a new registration for the coming season. Any un-financial player will not be cleared to play at***

***another club until money owing is paid***.

**Administration Fee:** A $100 non-refundable administration fee applies. Any player who registers and then advises the club that they are unable to pay will forfeit the $100 non-refundable payment.

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| --- | --- | --- | --- | --- | --- |
| **Player** |  | **Signature** |  | **Date** |  |
| **If under 18 years old then a parent / guardian must sign** | | | | | |
| **Parent / Guardian** |  | **Signature** |  | **Date** |  |

*Braves Registration Form Season 2018-2019 – PO Box 1051, Willagee Central WA 6156*

*Email: Secretary -* [*samantha@australianvandadium.com.au*](mailto:samantha@australianvandadium.com.au)

*Registrar – diana.northan@health.wa.gov.au*