

GBFUA

Great Britain Floorball & Unihockey Association

MEMBERSHIP FORM

Personal Details

Full Name	Nationality	Date of Birth
-----------	-------------	---------------

Address	Telephone	Mobile
---------	-----------	--------

Town	Post code	Email Address
------	-----------	---------------

Emergency Contact

Full Name	Telephone (Daytime)	Telephone (Work)
-----------	---------------------	------------------

Address	Telephone (Evening)	Mobile
---------	---------------------	--------

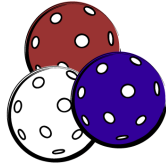
Town	Post code	Relationship
------	-----------	--------------

Medical / Injury Details

Detail any medical conditions/allergies that we should be aware of:

Please provide details of medication that must be administered:

Do you have any past or current injuries that we should be aware of:



GBFUA

Great Britain Floorball & Unihockey Association

MEMBERSHIP FORM

Further Information

Have you played Floorball/Unihockey before, club/regional/national?

Do you have a coaching qualification? If yes, please provide details:

Do you have an official's qualification? If yes, please provide details:

Would you be prepared to become a volunteer helper or official at our club? – (If yes, our honorary secretary will contact you).

Membership Fees

Member	Yearly Fee	Please Tick
Full Membership	£35.00	<input type="checkbox"/>
Student Membership (Full Time Education, Not Working)	£20.00	<input type="checkbox"/>
Youth Membership (under 16)	£15.00	<input type="checkbox"/>

Signature

Signed:

Date

Parent/Guardian Name (if under 18)

Signed:

Date

By signing this document you have read and agree to the constitution of the GBFUA.