



GBFUA

Great Britain Floorball & Unihockey Association

MEMBERSHIP FORM

Personal Details

Full Name	Nationality	Date of Birth
<hr/>		
Address	Telephone	Mobile
<hr/>		
Town	Post code	Email Address
<hr/>		

Emergency Contact

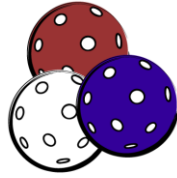
Full Name	Telephone (Daytime)	Telephone (Work)
<hr/>		
Address	Telephone (Evening)	Mobile
<hr/>		
Town	Post code	Relationship
<hr/>		

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:



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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

National Cup Weekend Membership	£ 5.00	
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)	£20.00	<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.