

## SYDNEY WINDIES CRICKET CLUB INC.

P O BOX 225, WILLOUGHBY NSW 2068 IN C9885483

## MEMBER'S APPLICATION FORM

## PLEASE PRINT CLEARLY

First Name:	
Middle name:	
Last name:	
D OB:	Country of Birth:
Email:	
A ddress:	
Suburb:	Post code:
Home Phone:	Wark Phone:
Mob#:	20000000000000000000000000000000000000
Profess ion:	
If Batman's, what position:	ler, Fast MediumSpinWicket Keeper
Next of Kin name:	Next of Kin Phone #:
Any illness or allergy for which medicati	on is required?
If yes, please specify	
Does the participant have a physical, in	tellectual or sensory impairment?
Anything that can be done to assist part	ticipation?
Would like to make any comment:	
Signature	Date