2021 Athlete Registration Renewal Form



4 Lowry Place BENALLA VIC 3672 T +61 (0)3 5762 7494 F +61 (0) 3 5762 3560 E mail@siasport.org

Personal details					
Athlete name:	ame			Given N	lames
Athlete registration number:		AUS		Date of birth:	
Gender (please circle)		Male	Fema	lle	
Address:					
Suburb/city/town:					State:
Post code:					
Postal address: (if different to above)					
Suburb/city/town:					State:
Post code:					_
Phone number:					
Email:					_
Mobile:					_
Sports (tick ✓ the sports you do/would like to do)					
Alpine skiing		Swimming			□ Athletics
Basketball		🗖 Tennis			□ Soccer
Cricket/Indoor Cric	cket	🗖 Rowing	g		Table Tennis
I AFL		🗖 Judo			□ Cycling
Tenpin Bowling		□ Softball			Futsal
□ Netball		□ Golf			□ Other, please list
Payment Options					
Please find enclosed my payment for \$25.00 or \$70.00 for 3 years Donation: \$					
□ By cheque/money	order 🛛 By cash		□ By direct debit ANZ Account NEW Account Details Account name: Sport Inclusion Australia BSB: 014 215 Acc. No.: 4221 14518 Please quote athlete registration number.		
□ By credit card	Name on card:				
	Expiry date:			Card type	
	Signature:			Date	
Office Use Only	Date rec.	Date rec.:		Receipt no.:	