



2012 APPLICATION FOR REGISTRATION OF FOOTBALL CLUB

Prescribed Form CFFNSW02

Please PRINT using a black or blue ball point pen.

PLEASE COMPLETE ALL SECTIONS AND SEND TO YOUR COMPETITION ADMINISTRATOR.

CLUB DETAILS

1. Name of Football Club

2. Form of football played by your Club
 Outdoor Futsal Beach

3. ACN, ABN, Incorporated Association Number

4. Street address of Football Club

 Suburb

 State Postcode

5. Mailing address of Football Club (if different from above)

 Suburb

 State Postcode

6. Football Club email address

7. Football Club telephone number

8. Football Club facsimile number

9. Which State or Territory Federation are you a member of?

9a. Which District Association/Zone are you a member of?
If not a member, please advise e.g. church group, Armed Forces, direct affiliate to State/Territory Federation etc.)

CLUB PRIMARY CONTACT INFORMATION

10. Title of contact person
 Mr Mrs Miss Ms Dr Prof

11. Name of contact person
 First name
 Last name

12. Street address of contact person

 Suburb

 State Postcode

13. Email address of contact person

14. Telephone number of contact person

15. Position within Football Club

GENERAL CLUB INFORMATION

16. How many registered players does your Football Club have?
 Male Female
 Under 18 Under 18
 Over 18 Over 18

17. If your Football Club has a logo, please attach a colour image

18. Please provide details of your Football Club's committee

Name	Position
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

19. Does your Football Club have any paid personnel? Yes No

If yes, please provide the following details

Name	Role	Full time (FT) Part time (PT)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

SIGNING

The Football Club applies to Christian Football Federation NSW to be registered as a Christian Football Club in NSW. The Football Club warrants that the information provided on this Prescribed Form is current and correct and that it will promptly notify the Competition Administrator of any changes. By signing this Form, the Football Club and its Officials agree to comply with the CFFNSW Statutes, including the Registration Regulations, the Disciplinary Regulations, the Code of Conduct and the Grievance Resolution Regulations.

(Signature of Football Club Primary Contact) (Date)

FOR COMPETITION ADMINISTRATOR OFFICIAL USE ONLY

DATE RECEIVED:	COMPETITION ADMINISTRATOR APPROVED:
DATE APPROVED:	REGISTRAR SIGNATURE:



GUIDANCE NOTES FOR APPLICATION FOR REGISTRATION OF FOOTBALL CLUB FORM

PROCESS

Providing false or misleading information could result in the immediate cancellation of registration.

This form is to be sent to the Competition Administrator (body who conducts and manages the competitions that your Football Club participates in). Once the Competition Administrator has approved the Club's application and has indicated so in the official section, a duplicate of the form will be forwarded to the CFFNSW. All information contained on this form is to be entered into the designated system by the Competition Administrator, unless agreed otherwise.

CLUB DETAILS

1. Insert the name of your football club.
2. Indicate whether you are an organisation participating or conducting outdoor football, an organisation participating or conducting Futsal, or whether you are an organisation participating or conducting beach football.
3. The registration number of the Football Club is to be provided e.g. Incorporated Associations attained via the State or Territory Office of Fair Trading.
4. The street address of the Football Club is to be provided, including suburb, state and postcode.
5. If the mailing address of the Football Club is different from the street address, please provide details.
6. The email address of the Football Club is to be clearly printed. If the Football Club does not have an email address, please provide an email address of a Committee Member who will be the contact for any correspondence. Should the Committee Member cease to be involved with the Football Club, or the email address has changed, please notify your Competition Administrator immediately.
7. The contact telephone number of the Football Club (including area code if landline—e.g. 02 9345 5555) is to be provided. If the Football Club does not have a general telephone number, please provide an alternative (e.g. The Secretary's telephone number).
8. Please provide a facsimile number for the Football Club (including area code). If the Football Club does not have a facsimile, please provide an alternative if available.
9. The name of the State or Territory Federation which is the governing body of Christian Football in the Football Association's State or Territory (e.g. Christian Football NSW) is to be provided.
- 9a. Please specify the name of the District Association/Zone of which the Football Club is a member (e.g. Hunter Christian Churches Football, QCSA, etc.)

CLUB PRIMARY CONTACT INFORMATION

10. The gender of the contact person is to be advised.
11. Please print the first and last name of the contact person for the Football Association.
12. Please provide the street address of the contact person if it is different from the Football Club street address. Please include suburb, state and postcode.
13. Please provide the telephone number of the contact person if it is different from the Football Club telephone number.
14. Please provide the email address of the contact person if it is different from the Football Club email address.
15. Please state the position of the contact person within the Football Club e.g.

GENERAL CLUB INFORMATION

16. Registered player numbers are broken down into male and female, those under 18 years of age and those over 18 years of age. The total number of registered male and female players should equal the total numbers of those under 18 years of age and those over 18 years of age, for example:

Male:	100	Female:	100
Under 18:	60	Under 18:	70
Over 18:	40	Over 18:	30

17. Attach a colour image of the Football Club's logo.
18. A Football Club can comprise many Committee Members. Please provide a list of your current Committee members, together with their respective position on the Committee. Please notify your Competition Administrator should any of the Committee members no longer be associated with the Football Club.
19. Please indicate whether your Football Club has any paid employees who partake in football activities only. If the answer is 'yes', please provide their names, their role within the Football Club and whether they are employed on a full-time or part-time basis by indicating FT (full-time) or PT (part-time).

SIGNING

The Football Club Primary Contact must read the declaration and sign and date the form where required. **THE FOOTBALL CLUB WILL NOT BE REGISTERED IF THE FOOTBALL CLUB PRIMARY CONTACT HAS NOT COMPLETED THIS SECTION.**