



Application Form – NRHA Registration

CLUB**NAME:** _____**SECTION A - Class of Membership** *(Please tick where appropriate)*New Registration
Player

Re-registration

Data amendment

Insurance Only

- Club Official
- Coach
- Referee
- Beginner/Trainee

SECTION B – Applicant information

Surname: _____ Forenames: _____

Sex: Male / Female Date of Birth: _____

Home Address: _____

_____ Postcode: _____

Telephone: _____ Email: _____

SECTION C – Guardian information *(req. if applicant under 18 years)*

Surname: _____ Forenames: _____

Sex: Male / Female Date of Birth: _____

Home Address: _____

_____ Postcode: _____

Telephone: _____ Email: _____

Section D**Please state the name of your previous Club & Federation (if not in the UK) and the year last registered.....**

.....

I declare that the above information is correct. In signing this form I agree that the above named applicant is bound by the laws and resolutions of the National Roller Hockey Association of England.

Signed (applicant) _____ Date: _____

Signed (guardian, if under 18) _____ Date: _____

Please stay in touch. The National Roller Hockey Association of England will hold and use the data that you have supplied for administrative purposes and to keep you informed of its fundraising activities and other activities. We hope you will want to stay touch with our work and ask you regularly visit www.nrha.co.uk for all the latest information and news.