

FOUNDATION MEMBER APPLICATION FORM

Player Details

| | |
|-----------------|--|
| Name | |
| Address | |
| | |
| | |
| D. O. B. | |
| Mobile | |
| e-mail | |

Club Details

| | |
|--------------|--|
| Name: | |
| | |

- I am happy to vote/confirm _____ as my nominated club/state representative on the UWRA executive committee.
- I confirm that I am happy to nominate **Ricardo Iriarte** as the National Team coach and Chief Referee for 2016/2017 season.

| | | |
|--|-----|----|
| I confirm that my club has Public Liability Insurance that covers me for all Underwater Rugby Activities | YES | NO |
| I am already an AUF member (Please tick your choice) | YES | NO |
| I would consider becoming an AUF member | YES | NO |

In Case of Emergency (ICE)

| | |
|------------------------------|--|
| Name: | |
| Relationship | |
| Mobile/Home Telephone | |

- I confirm that I have paid the Foundation Membership Fee of \$5 on-line or to my designated club/state representative.
- I confirm that I am applying to becoming a foundation member of the UWRA and will abide by the Rules and By-Laws of the UWRA.
- I confirm that I have been advised that the first General Meeting of the UWRA will be held at PAN PAC 2016 @ 18h00 on Friday 27th May 2016 and understand that the elected club representatives will then vote on the allocation of the required office bearers in the UWRA.

Signed

Dated