  

**APPLICATION FOR MEMBERSHIP SQUASH NSW 2017**

Name: ……………………………………………………………………………………………………..

Address: ……………………………………………………………………………………………………

Date of Birth: ………/………/……………….. Under Age Group: ……………………………

Contact Tel: (H) ……………….……………… (M) ……………………………………………..

Email: ………………………………………………………………………………………………………

Squash Club: ………………………………………………………………………………………………

Class for which you are seeking entry (circle) **Talent** or **Development**

Current Ranking:

PSA/WSA: …………..……….. National: ………………………………State: ………………………..

 Please circle:

* I am a Financial Member of Squash NSW 2017 YES NO
* I am a member of a Regional Squad \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ YES NO
* I will be competing in Junior Ranking Tournaments YES NO
* I am available to attend Individual Championships AJO & AJC YES NO
* I am available for Australian Teams Championships (AJC 2017) YES NO
* I wish to be considered for inclusion in Travelling Squads to major tournaments YES NO
* I have competed in the Australian Junior Open (AJO) – Darwin, NT 2017 YES NO
* If selected to represent NSW, I am prepared to undertake fund raising activities for

 Squash NSW as required YES NO

**State Junior Membership Fee: $40**

(There is no fee payable for those members who play in the Sydney Junior Pennant Competition as fees are included in Pennant.) **All players to complete a Membership Form**

**Complete Membership Form & Preliminary Information and forward to Squash NSW**

Development

NSW Squash LTD

PO Box 211

Thornleigh NSW 2120 OR Email: admin@nswsquash.com.au

**Direct Deposit**: BSB 012 251 **Account number**: 498005801 **Account Name**: NSW Squash Limited

**Applications due**: Friday 3 February 2017

**PRELIMINARY INFORMATION FOR NSW JUNIOR SQUASH ACADEMY**

Name: ………………………………………………………….………………….............................

Date of Birth: …………………………. Age Group: ……………………..…………………

Signature of Player: ……………………………………………………………...............................

Signature of Parent/Guardian: ……………………………………… ………………………..……

(*if player under 18 years age)*

**Detail History** of personal performance over the last 12 months. – Best five results including date, event and placing or level of performance.

**Date Event Name Placing expected Placing Achieved**

**2017 Competition Targets** – outline your schedule for 2017 and prioritized events where possible.

1

2

3

**Squash Goals** (Briefly outline your future goals for your squash career)

This year,2017 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medium term 3 Years \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Current Coach Details:** Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: (H) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (M) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (W) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Training Venue:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Further particulars are set out in the Academy Program 2017 Information Sheet

Signature of Player:………..……………………………………………………………....................

Signature of Parent/Guardian: ………..……………………………………… ………………………

*(if player under 18 years age)*

***NOTE:*** *Additional requests to join the Academy Squads can be made throughout the year.*

*Squash NSW Program Manager, Donna Lane is available to discuss your application, enquiries are welcome.*

*Mobile: 0428751032 Email: donna.lane@det.nsw.edu.au*

|  |  |  |  |
| --- | --- | --- | --- |
|  | **NSW Squash Limited****ABN 52 992 519 238****PO Box 211****Thornleigh NSW 2120****Telephone: 02 8736 1244****Email: admin@nswsquash.com.au****Website: www.nswsquash.com.au** |  | C:\Users\MACDONALDS\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Word\Supported by the NSW Government.png |

**NSW Player Membership**

***(To be completed by players interested in In-House Competitions/Coaching/Development/Tournaments)***

**Membership valid: JANUARY to DECEMBER each year Year:** ……………………….

**Benefits:**

* Matrix rating and results
* Insurance cover when training and playing squash
* Access to NSW Squash coaching, competitions, development and tournaments
* NSW Squash Event Entry Form via [www.nswsquash.com.au](http://www.nswsquash.com.au) and Facebook
* Access and inclusion in National and State rankings
* Squash Career Pathways for juniors with access to Coaching and Development Camps
* NSW State and travelling squads

*Please complete the application form below and return to NSW Squash with payment*

Name: …..…….…….…….…….…….…….…….…….…………………….….. DOB: ……..………………….

Address: ………………………………………………………………..…….………………………………..……

Town/Suburb …………………………………………………………………….. Post Code: ………..…….……

Senior

Junior

Parent

Phone (h): ………………………………..……..… (m): …………………………….………………….………...

Email: …….………..……………………………..………………………………………….………… (Print Clearly)

Squash Club: …………………………………………………………Town/Suburb: .………..…………………

*I agree to abide by the rules, regulations and policies of NSW Squash Limited Please tick*

*I accept NSW Squash’s Privacy Policy (refer* [*www.nswsquash.com.au*](http://www.nswsquash.com.au) *website) Please tick*

Signature: ………………………………………………………………………… Date: …………………………

**Senior $50 PA** **Junior $40 PA** (Age Group Under ……………) Male/Female

|  |
| --- |
| **METHOD OF PAYMENT (*Please tick*)** |
| **Cheque / Money Order** | NSW Squash LimitedPO Box 211 Thornleigh NSW 2120 |
| **Direct Deposit** | Account Name: NSW Squash LimitedBSB: 012 251 Account No: 498005801 Reference: Name |
| **Credit Card** | Visa Mastercard  |
| Cardholder’s name *(print)* |  |
| Card number |  |
| Expiry date |  |
| Security code*(3 digit code reverse of card)* |  |
| Payment amount | $ |
| Signature *(Cardholder only)* |  |