



# BFQ Incorporated 2024 Player Registration Form

I hereby apply for Registration with **BFQ Incorporated** to play for  
(Club/Team) \_\_\_\_\_ for the 2024 season.

I agree to abide by the Constitution, Competition Rules and Players Code of Conduct of **BFQ Incorporated**.

I understand that:

- In the interest of safety for all players, BFQ Incorporated requires that **ALL** players shall wear appropriate shin pads and footwear as **approved** by the referee controlling each game during all matches sanctioned by BFQ Incorporated.
- The association offers player's injury insurance to all of its registered players whilst participating in or training for BFQ Incorporated sanctioned activities.
- The provision of personal income protection insurance to cover me when training for and playing matches sanctioned by BFQ Incorporated is my own responsibility, and should I require such insurance it is my personal responsibility to arrange this independently of the association through a suitably registered insurer or insurance agent.
- I understand and agree that whilst BFQ Incorporated will strive to enhance player safety at all of its sanctioned games BFQ Incorporated and its Office Bearers accepts no responsibility or liability for any and all injuries or loss of income incurred by me as a player involved in or training for BFQ Incorporated sanctioned matches.
- I declare that I have NO pre-existing medical conditions or ailments that could be harmful to myself or others whilst training for or playing in BFQ Incorporated sanctioned activities .
- I have read BFQ Incorporated Player Code of conduct and agree to abide by it whilst playing in and training for sanctioned BFQ Incorporated activities.
- I make myself available for selection to BFQ Incorporated representative football teams.  
YES                      NO                      (Circle whichever applies)

**Full Name:** \_\_\_\_\_

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

**Postcode:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Phone: (H)** \_\_\_\_\_ **(W)** \_\_\_\_\_ **(Mob)** \_\_\_\_\_

**Signature of Player:** \_\_\_\_\_ **Date:** \_\_\_\_\_

The following is to be completed by a parent/guardian if the player requiring registration is less than 18 years of age and shall reach

15 years of age (Senior Men's Competition)  
13 Years of age (Senior Women's Competition)  
*during* the year of the season being applied for.

I consent to the above signed applying for registration with BFQ Incorporated.

**Parent / Guardian Name:** \_\_\_\_\_ **Relationship to Player:** \_\_\_\_\_

**Signature of Parent/Guardian:** \_\_\_\_\_

**This form is to be retained by the Club.**