

## REGISTRATION FORM SEASON 2024/25

If you are registering by mail, please post back to

PO Box 3056

SUCCESS WA 6964

[www.yangebupknights.com.au](http://www.yangebupknights.com.au)

[yangebupknights@gmail.com](mailto:yangebupknights@gmail.com)

### Welcome to the 2024/25 Teeball Season

Registration day is Saturday 17th August from 2pm to 4pm at the clubrooms – Aubin Grove Sport and Community Facility, 71 Camden Boulevard, Aubin Grove.

**Please note** a *minimum payment of \$50* is required when registering, with the remainder to be paid by the end of October. Families who have paid fees in full by the 2nd Game will go into the draw to win a \$50.00 gift card.

**Attendance at the rego day is primarily for “new” members to the club to enable sizing of uniforms.** Existing members can register by mail or email (with payment by cheque or Direct Deposit into the club bank account – BSB 126 545, Acc no 2266 1581, please add players name in the reference field). If posting registration forms, please send to PO Box 3056 Success 6964. Payment can also be made by cash or eftpos at the clubrooms on registration day.

Please remember: if you are emailing your registration forms please scan and email. We cannot accept a photo of the registration form.

Tees will be set up on the rego day for children to have a practice hit. As a special treat, there will also be a blow-up batting cage where the children can have a go hitting the ball. There will be some gloves available for purchase and we will be organising Fielders Choice to visit on a Thursday in early October with a full range of equipment for purchase.

Please don't hesitate to contact us if you have anything we can help you with.

We hope you enjoy the season!

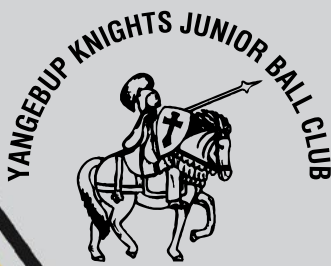
Natalie Knowles  
Registrar  
[yangebupknights@gmail.com](mailto:yangebupknights@gmail.com)

Colin Gibb  
President  
Mobile: 0419 930 246  
[ck.s@bigpond.net.au](mailto:ck.s@bigpond.net.au)

#### Office Use Only

Paid: Deposit \$ \_\_\_\_\_  
Total \$ \_\_\_\_\_

Receipt Number: \_\_\_\_\_  
2024 Team: \_\_\_\_\_



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## PLAYER REGISTRATION DETAILS

(Registrar: Natalie Knowles 0410 791 325)

Player Surname: \_\_\_\_\_ Player First Name: \_\_\_\_\_

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

Telephone-Home: \_\_\_\_\_ Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Player Birth Date: \_\_\_\_\_ Player Birth Certificate No.: \_\_\_\_\_

Parent/s Surname: \_\_\_\_\_ Parent/s First Name: \_\_\_\_\_

Played Last Year:  YES  NO School: \_\_\_\_\_ School Year: \_\_\_\_\_

\*Same Team:  YES  NO Team: \_\_\_\_\_ \*Group with the following family: \_\_\_\_\_

\* Any team requests are subject to the Clubs Discretion.

As parental participation is an integral part of developing a team, please indicate which area you can assist with:

Coach:  Assist. Coach:  Manager:  Scorer:  Umpire:

\*Eligible coaches may receive a reduction in Registration Fees for 1 Child – Conditions do apply.

\*Please note that if none of the above are ticked then you need to be aware that we may place you on a roster to fill vacant team positions

**I agree to allow my child as indicated above to be a player member of the Yangebup Knights Junior Ball Club and I agree that my child and I will abide by the club's rules, policies and values, and the code of behaviour of TBAWA. This includes remaining with, or appointing a guardian for, my child during training sessions and games.**

I understand that my child **will not** be placed in a team until I have paid the **non-refundable** \$50 deposit towards the fees for the season.

I understand that all monies owing to the club are to be finalised by the 31st October, and if I am unfinancial, this may lead to my child not being able to play after this date until all outstanding monies are paid in full.

I accept that as a parent/guardian I will be placed on a team roster and I agree to undertake my duties with positiveness.

I will return the club shirt after the final game to the team manager.

My signature below is confirmation that I have read, understand, and agree to abide by the YKJBC Code of Conduct.

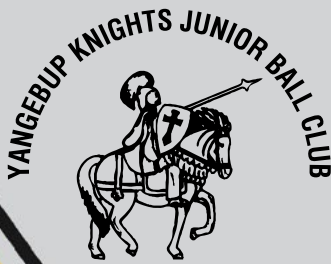
Signed: \_\_\_\_\_ Name: \_\_\_\_\_ Date: / /

**Please complete one form per player and return to the Registrar ASAP via email or on Registration Day, 17th Aug 2024 (cut off for registration requests is 31 Aug 24, requests will not be considered for any forms received after this date)**

### Office Use Only

Paid: Deposit \$ \_\_\_\_\_  
Total \$ \_\_\_\_\_

Receipt Number: \_\_\_\_\_  
2024 Team: \_\_\_\_\_



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Player Surname: \_\_\_\_\_ Player First Name: \_\_\_\_\_

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

Telephone-Home: \_\_\_\_\_ Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Player Birth Date: \_\_\_\_\_ Player Birth Certificate No.: \_\_\_\_\_

Parent/s Surname: \_\_\_\_\_ Parent/s First Name: \_\_\_\_\_

## UNIFORM DETAILS

(Uniforms: Natalie Knowles 0410 791 325)

Please tick the required size (incorrect size uniforms can be exchanged at first training session)

Items	Sizes	Qty	Cost	Amount
Pants <sub>(CMS)</sub>	60 <input type="checkbox"/> 65 <input type="checkbox"/> 70 <input type="checkbox"/> 75 <input type="checkbox"/> 80 <input type="checkbox"/> 85 <input type="checkbox"/> 90 <input type="checkbox"/> 95 <input type="checkbox"/>	_____	\$30.00	\$ _____
Socks	Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/>	_____	\$12.00	\$ _____
Caps	Baseball Style – one size fits all	_____	\$16.00	\$ _____
_____	_____	_____	\$ _____	\$ _____

TOTAL \$ \_\_\_\_\_

Notes:

- Team shirts need to be returned at the end of the season.
- Supporter's caps, shirts and other items are available for purchase from the Uniform Officer.
- Please ensure that children change out of Teeball shirts as soon as they return home after their game. Shirts need to be cared for to ensure their condition remains good for future seasons.

## TEEBALL 2024/25 SEASON FEES

(Treasurer: Jen Aquilina 0424 025 843)

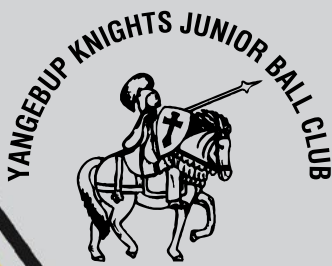
				Amount
First Child	\$120.00	Subsequent Children	\$110.00	\$ _____

Financial assistance may be available to eligible families through DSR's KidSport funding. Please contact the Treasurer if you would like further information on this.

If you are unable to pay the full amount by Oct 31, please contact the Treasurer to make payment arrangements.

**Would you prefer to pay your fees via EFT? Our BOQ bank details are Yangebup Knights Junior Ball Club BSB 126 545 A/c 2266 1581 Please ensure you note the full name of the player in the reference field.**

**Please complete one form per player and return to the Registrar ASAP via email or on Registration Day, 17th Aug 2024 (cut off for registration requests is 31 Aug 24, will not be considered for any forms received after this date)**



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### PHOTOGRAPHY & MEDIA CONSENT AND RELEASE FORM FOR CHILDREN

I, \_\_\_\_\_ (Name), the parent or legal guardian of  
\_\_\_\_\_ (All children's names)\*

\* If you only consent to a certain child/children, please use a different form for each child.

#### Please tick one box:

Hereby understand, agree & give consent

Do not give consent\*\*

\*\* Please note, if you do not consent, this does not mean that photos/videos of your child may not be taken, this means that the club will not publish any photos/videos in any way.

to Yangebup Knights Junior Ball Club representatives, to take and/or use photographs and/or digital images and/or videos of my child for use in:

Media releases, media articles - including newspapers, radio, television - printed publications and/or educational materials relevant to the Yangebup Knights Junior Ball Club,

Social publications and communications such as Yangebup Knights Junior Ball Club's Facebook pages and website.

I agree that my child(ren)'s name and identity may be revealed in descriptive text or commentary in connection with the image(s).

I authorise the use of these images without compensation to me. All negatives, prints, digital reproductions shall be the property of Yangebup Knights Junior Ball Club.

I understand that any image or video that is published online can be copied and redistributed without knowledge from the club. Once published, we may not be able to retrieve or delete images if consent is then withdrawn after publishing.

I understand that my consent decision will not change until another consent form is filled in, consent box ticked for desired change, signed and dated by a parent or legal guardian, returned to the club and receipt of change is confirmed by the club.

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

Date: \_\_\_\_\_