

Lynn-Avon United AFC Player Registration Form Season 2007

Name:																									
Address:																									
Phone:	Home: Work: Mobile:																								
Date of Birth:																									
E-mail:	From time to time, LAUFC will send out e-mail updates on events happening at the club. If you are happy to receive these e-mails, please tick the box. <input type="checkbox"/>																								
Occupation:	<table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Accounting</td> <td><input type="checkbox"/> Hospitality / Tourism</td> </tr> <tr> <td><input type="checkbox"/> Administration</td> <td><input type="checkbox"/> HR / Recruitment</td> </tr> <tr> <td><input type="checkbox"/> Advertising/Media/Entertainment</td> <td><input type="checkbox"/> Insurance / Superannuation</td> </tr> <tr> <td><input type="checkbox"/> Banking / Financial Services</td> <td><input type="checkbox"/> IT</td> </tr> <tr> <td><input type="checkbox"/> Call Centre / Cust. Service</td> <td><input type="checkbox"/> Legal</td> </tr> <tr> <td><input type="checkbox"/> Community / Sports</td> <td><input type="checkbox"/> Manufacturing / Operations</td> </tr> <tr> <td><input type="checkbox"/> Construction</td> <td><input type="checkbox"/> Real Estate</td> </tr> <tr> <td><input type="checkbox"/> Consulting / Corp. Strategy</td> <td><input type="checkbox"/> Retail</td> </tr> <tr> <td><input type="checkbox"/> Education / Training</td> <td><input type="checkbox"/> Sales / Marketing</td> </tr> <tr> <td><input type="checkbox"/> Engineering</td> <td><input type="checkbox"/> Science / Technology</td> </tr> <tr> <td><input type="checkbox"/> Government / Defence</td> <td><input type="checkbox"/> Trades / Services</td> </tr> <tr> <td><input type="checkbox"/> Healthcare / Medical</td> <td><input type="checkbox"/> Transport / Logistics</td> </tr> </table> <p>Sponsorship opportunities often arise, and your occupation could be a significant factor. If you are happy to be contacted by one of our sponsors, either by mail or e-mail, please tick the box. <input type="checkbox"/></p>	<input type="checkbox"/> Accounting	<input type="checkbox"/> Hospitality / Tourism	<input type="checkbox"/> Administration	<input type="checkbox"/> HR / Recruitment	<input type="checkbox"/> Advertising/Media/Entertainment	<input type="checkbox"/> Insurance / Superannuation	<input type="checkbox"/> Banking / Financial Services	<input type="checkbox"/> IT	<input type="checkbox"/> Call Centre / Cust. Service	<input type="checkbox"/> Legal	<input type="checkbox"/> Community / Sports	<input type="checkbox"/> Manufacturing / Operations	<input type="checkbox"/> Construction	<input type="checkbox"/> Real Estate	<input type="checkbox"/> Consulting / Corp. Strategy	<input type="checkbox"/> Retail	<input type="checkbox"/> Education / Training	<input type="checkbox"/> Sales / Marketing	<input type="checkbox"/> Engineering	<input type="checkbox"/> Science / Technology	<input type="checkbox"/> Government / Defence	<input type="checkbox"/> Trades / Services	<input type="checkbox"/> Healthcare / Medical	<input type="checkbox"/> Transport / Logistics
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Player Signature: **Date:**

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OFFICE USE ONLY:

Fees Paid Date: **Team :**

Receipt #:

Committee Member: **Date:**