

2015 Student Athlete Registration Renewal Form

Ausrapid 

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Personal details

Athlete name: _____
Surname Given Names

Athlete registration number: **AUS** _____ **Date of birth:** _____

Gender (please circle) **Male** **Female**

Address:

Suburb/city/town: _____ **State:** _____

Post code: _____

Phone number: _____

Email: _____

Mobile: _____

School Name/address: _____

Suburb/city/town: _____ **State:** _____

Post code: _____

Sports (tick ✓ the sports you do/would like to do)

- | | | |
|---|-----------------------------------|---|
| <input type="checkbox"/> Alpine skiing | <input type="checkbox"/> Swimming | <input type="checkbox"/> Athletics |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Tennis | <input type="checkbox"/> Soccer |
| <input type="checkbox"/> Cricket | <input type="checkbox"/> Rowing | <input type="checkbox"/> Table Tennis |
| <input type="checkbox"/> Indoor cricket | <input type="checkbox"/> Judo | <input type="checkbox"/> Cycling |
| <input type="checkbox"/> Tenpin Bowling | <input type="checkbox"/> Softball | <input type="checkbox"/> Other, please list |

Payment Options

Please find enclosed my payment for **\$15.00**

By cheque/money order By cash

By direct debit

Account name: AUSRAPID Inc
BSB: 033 039 Acc. No.: 15 5174
Please quote athlete registration number.

By credit card Card number: _____

Name on card: _____

Expiry date: _____ Card type _____

Signature: _____ Date _____

Office Use Only

Date rec.:

Receipt no.:

