



Please return completed forms to:

AIMMNA
PO Box 607 Elizabeth SA 5112
or email to pturk@samna.org.au

AGE DECLARATION

Please note: All Players and Officials need to be registered with AAIMMNA Inc.

When lodgement of the Age Declaration form, please provide a copy of either:

- Proof of Age ID, _____
 Drivers Licence _____
 Birth Certificate. _____

PERSONAL DETAILS

Name: _____

Postal Address: _____

State: _____ P/C: _____

Mobile: _____ Email: _____

Date of Birth: ____ / ____ / ____

DIVISION(S)

Please tick appropriate division(s):

- Open 19 and under
 Open Reserves Mixed
 23 and under

We: _____

hereby declare: _____

that the above registered player detailed on the official AIMMNA Player/Official Registration form are in fact of the correct age for the stated "Age Division". We undertake the onus of integrity when we as a National Body/Team/Club/Association do declare that this player is eligible for such Division. We will provide documentation for the said player in the form of a copy of either Proof of Age ID, Driver Licence or Birth Certificate.

Name of Office Bearer: _____

Position Held: _____

Address: _____

State: _____ P/C: _____

Phone: (w) _____ (h) _____

Fax: _____ Email: _____

Signature of Office Bearer: _____

Date: ____ / ____ / ____

Name of Witness: _____

Signature of Witness: _____

Date: ____ / ____ / ____

Office Use Only

Registration No: _____

- Age Verified
 Proof Attached