

OLD AQUINIANS HOCKEY CLUB



Reds Hockey
Registration 2016

Social Member

Name: _____
(First) (Surname)

Address: _____

Suburb: _____ **Postcode:** _____

Phone: (H) _____ **Fax:** _____ **(M)** _____

Date of Birth: _____

E-Mail: _____

Work Phone: _____

As part of our commitment to our sponsors, member's details may be made available to them. Please indicate as shown:

I do agree / do not agree to my details being made available.

signed

date

Costs: \$50

Please return to: **OAHC**
P.O. Box 1191
Bentley DC 6983

OR EFTPOS at the Club OR
Direct Deposit into **Commonwealth Bank BSB No. 066 000 A/c No.1066 6630**
Account Name Old Aquinians Hockey Club. Please put your name in the details

Amount Enclosed: _____

MAJOR SPONSOR



IC FRITH & ASSOCIATES (WA) INSURANCE BROKERS