



PLAYER INTENTION FOR NEW SEASON

Player Name: _____ Singlet Number: _____

Parent/Guardian names: _____

Contact details:

Home Phone: _____ Mobile: _____

Email: _____

Please help us keep our records up-to-date by letting us know of any changes with your contact details.

Current team details:

Age Group: _____ Grade: _____ Team Number: _____

Coach: _____

**I will / will not be playing for Knox City Cougars
this Summer / Winter Season _____ (year).**

Player signature: _____

Parent / Guardian signature: _____

Date: _____

Note: If this form is not completed and returned in a timely sense, the club cannot guarantee selection in a team for the next season. We ask this, so that our Grade Coordinators can do their job more efficiently and accurately, which ultimately affects our ability to grade teams to the best of our and their ability.

**All forms are to be submitted to the Club Secretary, Stefan Bailey,
on or before the designated Registration Day for that upcoming season.**