

FOOTBALL WEST MIDWEST GASCOYNE ZONE
GERALDTON SPORTING ABORIGINAL CORPORATION AND WA CENTRE RURAL HEALTH
"SOCCER FOR CHANGE PROGRAM"

PROGRAM NAME	<i>Soccer for Change School Holiday Program</i>
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PLAYER DETAILS

TITLE	MR	MISS	MS	MRS	
GENDER	MALE	FEMALE	ABORIGINAL		Y N
FIRST NAME					
MIDDLE NAME					
SURNAME					
FFA NUMBER <i>(IF KNOWN)</i>					
DATE OF BIRTH	DAY	MONTH	YEAR		
ADDRESS	POSTCODE				
EMAIL ADDRESS					

PARENT/GUARDIAN DETAILS/EMERGENCY CONTACT

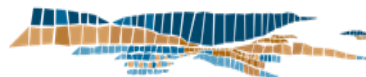
PARENT/GUARDIAN NAME	
RELATIONSHIP TO PLAYER	
PHONE / MOBILE	
EMAIL	

OTHER INFORMATION

NAME OF YOUR LOCAL HERO/PERSON YOU LOOK UP TO/ROLE MODEL	
DIETARY INFORMATION	
OTHER INFORMATION	



Geraldton Sporting Aboriginal Corporation



Western Australian Centre for Rural Health