



FRSC REGISTRATION FORM

Member Details

Membership Number _____ (Office Use)

Name _____

Address _____

Age _____ Date of birth ____/____/____

Mobile No _____ Email _____

Division preferences (Please note that these divisions may vary on event days)

Rookie Under 14 Under 18 Open DK Open Girls/Womens Foam

Signed _____ Date _____

Parent/ Guardian/ Next of Kin / Emergency Contact Details

Name _____

Mobile No _____ Email _____

Second Emergency Contact (Optional)

Name _____

Mobile No _____ Email _____

Membership Fees

All Divisions \$90.00

Family Membership \$150.00

Social Members or current membership with another Surfing WA affiliated club \$60.00

Amount paid \$ _____

Bank Payment Details - Reference with First Initial and Surname eg B. Invert

Bankwest

Foam Riders Surf Club

BSB 306 058

Account # 0709 659