

PLAYER REGISTRATION FORM

Please PRINT Clearly

Unattached Player Registration ** Information marked with * (below) does not apply to Unattached Player/s

***Band Name:** _____

Player's Family Name: _____

Player's Given Names: _____

Player's Address: _____

Postcode: _____

Player's Email Address: _____

Player's Date of Birth: _____

For Identification Purposes Only

Attach Proof of age Evidence Sighted By Registrar: _____

Registrar's Signature

Player's Principal Instrument: _____

Player's Declaration: I _____ hereby declare that all
Players Name

information given on this form, to the best of my knowledge, is correct and that I am not currently registered with any Australian Band outside Queensland. (See Note 2)

Signature of Player

Date

Band Secretary / School Rep to Witness: _____

Signature of Secretary

Date

***Previous Band Registration:** _____ ***Registration Number:** _____

Name of Band

***Date of Clearance from Previous Band:** _____

Date

Registration Accepted: YES / NO

Strike out one

QBA Registrar Signature: _____

New Registration Date: _____

Registration Number: _____