

**NEWCASTLE MEN'S HOCKEY  
ASSOCIATION Inc.**



**2019  
REGISTRATION FORM**

**For NEW or TRANSFERRING  
or DUAL REGISTERED players.**

**Secretary**  
Cliff Monaghan  
P.O. Box 13  
New Lambton  
NSW 2305  
0425 259 610  
02 4920 7356  
Fax 02 4943 5989  
Email:  
cliffnellen@bigpond.com

Lodged by **West Hockey (Newcastle Men's) Hockey Club**

Players Name .....

Address .....

Phone (H) ( ) .....

(W) ( ) .....

Email .....

Date of Birth .....

Signed .....of **West Hockey (Newcastle Men's) Hockey Club**

Previous Club (if any) .....

Hockey NSW Registration Number .....

**Clearance from Previous Club**

I hereby confirm that ..... (Player's name)

Is clear of debt and other responsibilities and is able to transfer to another club.

Signed ..... of ..... Hockey Club

**DOES THIS PLAYER PLAY IN ANOTHER ASSOCIATION** Yes / No

**IF YES, Which is the Primary Registration / Association?** Nele / Other.....

Lodged with the Newcastle Men's Hockey Association Inc

Signed ..... Date .....