Federation University Badminton Club **Membership Registration Form**

Personal Information:	
First Name:	Last Name:
Date of Birth:/ Gender:	
Address:	
Suburb: Post code:	
	70 1 1 1 1
Contact details:	
Home Phone: ()	Mobile:
Email:	
University/Community Information:	
Please tick: Student □ Staff □ Community □	
If Student, please provide student ID:	
Type of student at FedUni:	
TAFE or FedCollege □ Undergraduate □ Postgraduate □ HDR □	
Campus:	
Mount Helen ☐ Camp St ☐ SMB ☐ Horsham ☐ Gippsland ☐ or Other:	
Emergency Contact:	
Name:	Relationship:
Home Phone: ()	Mobile:
Please note that the information collected on this form may be passed on to a third party such as	

