



NCRLRA Membership Nomination

MEMBER DETAILS

First name _____
Surname _____
Mobile Number _____ Work Number _____
Email address _____

PARENT INFO (FOR JUNIOR MEMBERS)

First name _____
Surname _____
Mobile Number _____ Work Number _____
Email address _____

MEMBER TYPE (PLEASE TICK APPROPRIATE BOX)

Junior Active Member
Senior Active Member
Non – Active Member
Active Life Member

HAVE YOU PREVIOUSLY BEEN AN NCRLRA MEMBER

Yes No If Yes, what year/s? _____
Reason for ceasing previous membership:

Was there any disciplinary action taken against you whilst previously a member of the NCRLRA? Yes No
If yes; please give details: _____

ARE YOU OR HAVE YOU BEEN A MEMBER OF ANOTHER REFEREES ASSOCIATION?

Yes No If Yes, which association/s?

Was there any disciplinary action taken against you whilst previously a member of another association?
Yes No If Yes, which please give details?

ARE YOU AFFILIATED/CONNECTED WITH ANY CLUB IN THE JUNIOR/SENIOR RUGBY LEAGUE COMPETITIONS IN NSW

Yes No If Yes, which club/s and what role?

Was there any disciplinary/judiciary action taken against you whilst member of a club?
Yes No If Yes, which please give details?

I AGREE TO ADHERE TO THE OBJECTS & RULES AND CODE OF CONDUCT OF THE NEWCASTLE COALFIELDS RUGBY LEAGUE REFEREES ASSOCIATION

Name: _____

Signed: _____

Date: _____