



FOOTBALL
GOLD COAST

CLUB 2012 AFFILIATION PACK

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APPLICATION FOR MEMBERSHIP – 2012

TheClub

Mailing Address:.....

Club Phone:.....

1. The club and its' members agree to abide by the rules and regulations set down by Football Federation Australia, Football Queensland and the local rules and regulations as set down by Gold Coast Soccer Zone Inc.
2. The club and its' members agree to abide by the Codes of Conduct as set down in the CMC Rules.
3. The club will supply Football Gold Coast Inc. with copies of the appropriate Licences eg: Liquor/Food
4. The club will supply Gold Coast Inc. with a copy of their 2011 Audited Financial Report

We theClub have read the above and agree to comply with its directions. (Must be signed by at least 3 members of the committee)

Position:..... Print Name:.....

Signature:..... Date:...../...../.....

Position:..... Print Name:.....

Signature:..... Date:...../...../.....

Position:..... Print Name:.....

Signature:..... Date:...../...../.....

2012 CLUB APPLICATION FOR AFFILIATION

1.0 CLUB DETAILS

FULL NAME OF CLUB.....

POSTAL ADDRESS.....

POSTCODE.....FAX NO.....

GROUND LOCATION.....

GROUND NAME.....CLUBHOUSE PHONE.....

DATE OF CLUB AGM

CLUB ABN NUMBER.....

2.0 COMMITTEE DETAILS

PRESIDENT.....PHONE (M).....

EMAIL ADDRESS.....

VICE PRESIDENT.....PHONE (M).....

EMAIL ADDRESS.....

SECRETARY.....PHONE (M).....

EMAIL ADDRESS.....

TREASURER.....PHONE (M).....

EMAIL ADDRESS.....

REGISTRAR.....PHONE (M).....

EMAIL ADDRESS.....

3.0 CLUB CONTACTS

SENIORS.....PHONE (M).....

EMAIL ADDRESS.....

WOMEN.....PHONE (M).....

EMAIL ADDRESS.....

COMPETITION JUNIORS.....PHONE (M).....

EMAIL ADDRESS.....

SS FOOTBALL.....PHONE (M).....

EMAIL ADDRESS.....

REFEREE'S CO-ORDINATOR:

.....PHONE (M).....

EMAIL ADDRESS.....

COACHES DIRECTOR:

.....PHONE (M).....

EMAIL ADDRESS.....

*** Please note – ensure email addresses are correct as all correspondence will be sent via email to President, Secretary or relevant contact (ie: junior issues to junior contact)**

4.0 DETAILS

	NO OF FIELDS	RECOMMENDED SIZE OF FIELDS
MODIFIED FIELDS - U6-U7	30m x 20m
MODIFIED FIELDS - U8-U9	Min: 40m x30m Max: 50m x 40m
MODIFIED FIELDS - U10-U11	Min: 60m x 40m Max: 70m x 50m
SENIOR FIELDS - U12 UP	Min: 90m x 45 Max: 110m x 75m

HOW MANY FLOODLIT FIELDS?

- **ATTACH A DIAGRAM OF YOUR CLUBS FIELDS SHOWING ANY INTERCEPTING FIELDS.**
- **ANY RESTRICTIONS OR LIMITATIONS ON AVAILABILITY OF YOUR FACILITIES THROUGHOUT THE SEASON?**
- **PLEASE EXPLAIN: (ie available start date for competition, shared facilities etc.)**
-
-
-
-
-
-
-
-

5.0 CLUB FACILITIES

PLEASE COMPLETE THE FOLLOWING QUESTIONNAIRE REGARDING FACILITIES AVAILABLE AT YOUR CLUB.

Please tick and include details.

	YES	NO	DETAILS
<u>Administration</u>			
Long Term Lease	<input type="checkbox"/>	<input type="checkbox"/>
Is club Incorporated	<input type="checkbox"/>	<input type="checkbox"/>
Public Liability Insurance	<input type="checkbox"/>	<input type="checkbox"/>	Insurer..... Expiry Date..... Amount Insured.....
Coaching Co-ordinator	<input type="checkbox"/>	<input type="checkbox"/>
<u>Ground</u>			
Covered Reserve Benches	<input type="checkbox"/>	<input type="checkbox"/>
Score Board	<input type="checkbox"/>	<input type="checkbox"/>
Public Telephone	<input type="checkbox"/>	<input type="checkbox"/>
Public Address System	<input type="checkbox"/>	<input type="checkbox"/>
Public Toilets	<input type="checkbox"/>	<input type="checkbox"/>
Pitch Perimeter Fence	<input type="checkbox"/>	<input type="checkbox"/>
Floodlights - Australian Standard (night games only)	<input type="checkbox"/>	<input type="checkbox"/>
<u>Dressing Rooms</u>			
Can they be locked	<input type="checkbox"/>	<input type="checkbox"/>
Showers	<input type="checkbox"/>	<input type="checkbox"/>
Hot & Cold Water	<input type="checkbox"/>	<input type="checkbox"/>
Toilets	<input type="checkbox"/>	<input type="checkbox"/>
<u>Referees Room</u>			
Can it be locked	<input type="checkbox"/>	<input type="checkbox"/>
Showers	<input type="checkbox"/>	<input type="checkbox"/>
Hot & Cold Water	<input type="checkbox"/>	<input type="checkbox"/>
Toilets	<input type="checkbox"/>	<input type="checkbox"/>

Other facilities offered by your club.....
.....

***NB THIS SECTION MUST BE COMPLETED EVERY YEAR.**

FIELD MAP

DATE.....

.....CLUB.

PLEASE INDICATE CLUBHOUSE AND POSITIONS OF ALL FIELDS AT YOUR CLUB.

JUNIOR SIGN-ON ADVERTISING

Junior Sign-on advertising will be placed in the Gold Coast Bulletin and the Daily News on **SATURDAY 04th FEBRUARY 2012.**

Would you please complete the following and return with your Application for Affiliation by **16TH JANUARY 2012.**

CLUB:.....

SATURDAY 04TH FEBRUARY TIME: from.....to.....

SUNDAY 05TH FEBRUARY TIME: from.....to.....

CONTACT PERSON:.....
(FOR THE ADVERTISEMENT)

PHONE:.....

SIGNED:.....

CLUB POSITION:.....

DATE:.....

*** Please note that the cost for this advertisement is covered by Gold Coast Soccer Zone Inc.**



MEN'S PREMIER LEAGUE PREMIER RESERVE AND PREMIER YOUTH TEAM NOMINATIONS

WE THE.....CLUB

WISH TO ACCEPT THE INVITATION TO NOMINATE A TEAM IN THE 2012 PREMIER LEAGUE, PREMIER RESERVE AND PREMIER YOUTH COMPETITIONS.

A Nomination Fee of \$165.00 (GST included) per team must accompany this form either by cheque, cash or EFT directly into our bank account.

Bank – NAB
BSB – 084-917
Account No – 174351214
Account Name – Gold Coast Soccer Inc.

SENIOR CLUB CONTACT: _____

PHONE: _____(h)

_____ (w)

_____ (mobile)

SIGNED: _____

POSITION: _____

DATE: _____

NOMINATIONS CLOSE ON 16TH JANUARY 2012



MEN'S FIRST DIVISION AND FIRST DIVISION RESERVE TEAM NOMINATIONS

WE THE.....CLUB

WISH TO NOMINATE A TEAM IN THE 2012 FIRST DIVISION AND FIRST DIVISION RESERVE COMPETITIONS.

A Nomination Fee of \$165.00 (GST included) per team must accompany this form either by cheque, cash or EFT directly into our bank account.

Bank – NAB
BSB – 084-917
Account No – 174351214
Account Name – Gold Coast Soccer Inc.

SENIOR CLUB CONTACT: _____

PHONE: _____(h)

_____ (w)

_____ (mobile)

NOMINATIONS CLOSE ON 16TH JANUARY 2012



GOLD COAST YOUTH COMPETITION NOMINATION FORM

WE THE.....CLUB

WISH TO NOMINATE A TEAM IN THE 2012 GOLD COAST YOUTH COMPETITION.

A Nomination Fee of \$165.00 (GST included) per team must accompany this form either by cheque, cash or EFT directly into our bank account.

Bank – NAB
BSB – 084-917
Account No – 174351214
Account Name – Gold Coast Soccer Inc.

SENIOR CLUB CONTACT: _____

PHONE: _____ (h)

_____ (w)

_____ (mobile)

SIGNED: _____

POSITION: _____

DATE: _____

*** Note: This competition is not compulsory and open to all clubs**

(Proposed Friday night competition – TBC)

NOMINATIONS CLOSE ON 2ND MARCH 2012



MEN'S MIDWEEK COMPETITION

TEAM NOMINATION

WE THE.....CLUB

WISH TO NOMINATE A TEAM IN THE 2012 MEN'S MIDWEEK
COMPETITION.

**A Nomination Fee of \$165.00 (GST included) per team must accompany
this form either by cheque, cash or EFT directly into our bank account.**

Bank – NAB
BSB – 084-917
Account No – 174351214
Account Name – Gold Coast Soccer Inc.

SENIOR CLUB CONTACT: _____

PHONE: _____ (h)

_____ (w)

_____ (mobile)

SIGNED: _____

POSITION: _____

DATE: _____

NOMINATIONS CLOSE ON 24TH FEBRUARY 2012



MEN'S SUNDAY COMPETITION

TEAM NOMINATION

WE THE.....CLUB

WISH TO NOMINATE A TEAM IN THE 2012 MEN'S SUNDAY
COMPETITION.

**A Nomination Fee of \$165.00 (GST included) per team must accompany
this form either by cheque, cash or EFT directly into our bank account.**

Bank – NAB
BSB – 084-917
Account No – 174351214
Account Name – Gold Coast Soccer Inc.

GC Youth CLUB CONTACT: _____

PHONE: _____ (h)

_____ (w)

_____ (mobile)

SIGNED: _____

POSITION: _____

DATE: _____

NOMINATIONS CLOSE ON 29TH FEBRUARY 2012



WOMEN'S FIRST DIVISION TEAM NOMINATION

WE THE.....CLUB

WISH TO NOMINATE A TEAM IN THE 2012 WOMEN'S FIRST DIVISION
COMPETITION.

**A Nomination Fee of \$165.00 (GST included) per team must accompany
this form either by cheque, cash or EFT directly into our bank account.**

Bank – NAB
BSB – 084-917
Account No – 174351214
Account Name – Gold Coast Soccer Inc.

WOMEN'S CLUB CONTACT: _____

PHONE: _____(h)

_____ (w)

_____ (mobile)

SIGNED: _____

POSITION: _____

DATE: _____

NOMINATIONS CLOSE ON 24TH FEBRUARY 2012



WOMEN'S SECOND DIVISION TEAM NOMINATION

WE THE.....CLUB

WISH TO NOMINATE A TEAM IN THE 2012 WOMEN'S SECOND DIVISION
COMPETITION.

**A Nomination Fee of \$165.00 (GST included) per team must accompany
this form either by cheque, cash or EFT directly into our bank account.**

Bank – NAB
BSB – 084-917
Account No – 174351214
Account Name – Gold Coast Soccer Inc.

WOMEN'S CLUB CONTACT: _____

PHONE: _____ (h)

_____ (w)

_____ (mobile)

SIGNED: _____

POSITION: _____

DATE: _____

NOMINATIONS CLOSE ON 24TH FEBRUARY 2012



WOMEN'S THIRD DIVISION TEAM NOMINATION

WE THE.....CLUB

WISH TO NOMINATE A TEAM IN THE 2012 WOMEN'S THIRD DIVISION
COMPETITION.

**A Nomination Fee of \$165.00 (GST included) per team must accompany
this form either by cheque, cash or EFT directly into our bank account.**

Bank – NAB
BSB – 084-917
Account No – 174351214
Account Name – Gold Coast Soccer Inc.

WOMEN'S CLUB CONTACT: _____

PHONE: _____(h)

_____ (w)

_____ (mobile)

SIGNED: _____

POSITION: _____

DATE: _____

NOMINATIONS CLOSE ON 24TH FEBRUARY 2012

ACTION ITEMS LIST

DUE DATE	FORM	REMEMBER
16 TH JANUARY	JUNIOR SIGN-ON ADVERTISING FORM	Contact Person for sign-on
16 TH JANUARY	APPLICATION FOR MEMBERSHIP	Signed by 3 Committee Members
16 TH JANUARY	AFFILIATION APPLICATION	Field Maps, Strip Photos
16 TH JANUARY	NOMINATIONS FOR PREMIER, RESERVE AND YOUTH LEAGUES	Payment to accompany forms
16 TH JANUARY	NOMINATIONS FOR FIRST AND RESERVE DIVISION	Payment to accompany forms
24 TH FEBRUARY	NOMINATIONS FOR MEN'S MIDWEEK COMPETITION	Payment to accompany forms
24 TH FEBRUARY	NOMINATIONS FOR WOMEN'S FIRST DIVISION	Payment to accompany forms
24 TH FEBRUARY	NOMINATIONS FOR WOMEN'S SECOND DIVISION	Payment to accompany forms
24 TH FEBRUARY	NOMINATIONS FOR WOMEN'S THIRD DIVISION	Payment to accompany forms
29 TH FEBRUARY	NOMINATIONS FOR MEN'S SUNDAY COMPETITION	Payment to accompany forms
2 ND MARCH	NOMINATIONS FOR GOLD COAST YOUTH COMPETITION	Payment to accompany forms
2 ND MARCH	NOMINATIONS FOR JUNIOR TEAMS	Payment to accompany forms

Please do not hesitate to contact the office if you have any queries regarding Affiliation or Nominations.

FOOTBALL GOLD COAST INC.
PH: 07 5579 9544 FAX: 07 5579 9533
P O BOX 2040, NERANG BC, QLD 4211