

**Toukley Gorokan Soccer Club Inc.**  
**Request for Extension of time to pay Registration Fee**  
**All Fees must be paid in full by 31<sup>st</sup> May 2012.**

**Details of Person submitting request.**

Name: \_\_\_\_\_ Relationship to player: \_\_\_\_\_

Address: \_\_\_\_\_

Contact No's: \_\_\_\_\_

Player's Name: \_\_\_\_\_ Player's Age group or Team: \_\_\_\_\_

**Reason for Request:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I agree to pay an amount of \$ \_\_\_\_\_ per week/fortnight to ensure that my fees are paid in full by 31<sup>st</sup> May 2012. I certify that the above information is true and correct and that should I default on my payments I will not be permitted to play.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Player or parent/carer if player under 18 years)

**TGSC Use Only**

Amount of Registration Fee: \_\_\_\_\_

Any other relevant details: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Has Code of Conduct been signed? Yes/No

Extension been approved by Committee? Yes/ No

Signed:

President: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_

Secretary: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_

Treasurer: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Player advised: \_\_\_\_\_ (Date)

Registrar advised: \_\_\_\_\_ (Date)

**Please submit to The Secretary PO Box 262 Toukley NSW 2263**

