

## Registration form PSV WATERPOLO

The undersigned registers as a member of the water polo department of PSV Zwemsporten and declares that he/she agrees to the terms and conditions of membership as published on <a href="https://www.psvwaterpolo.nl">www.psvwaterpolo.nl</a>. He/she gives permission to pay the membership fee, starting permit, registration fee and other costs by direct debit.

Gender: Male	Female		
Initials: Pro	efix:	Surname:	
First name:			Date of birth (dd-mm-yyyy):
Street:			House number:
Zip code:		City:	
Phone number:		Mobile number:	
Email address:			
Email address of parent/g	uardian in case the new men	nber is younger than 1	16 years old:
Please tick the desired membership:    Including competition Under 12, Under 14   Including competition Under 16, Under 18   Including competition top sport (senior)   Including competition recreational sport (senior)   training member without competition participation   member intake group without competition participation			
NOTE: Photos and videos can be published on the website <a href="www.psvwaterpolo.nl">www.psvwaterpolo.nl</a> and on social media. If you object, please send an email to <a href="mailto:secretaris@psvwaterpolo.nl">secretaris@psvwaterpolo.nl</a> .			
Start date membership (dd-mm-yyyy):  Signature (possibly parent or guardian):			
			Date (dd-mm-yyyy):