



Registration Form: 2024 AFLVM Season

Club: _____ **Venue/Ground:** _____

Club Address: _____

Club Website / Social Media: _____

Proposed Men's Teams (tick which teams):

Men's 35s (>35)	Men's 35s Reserves (>35)	Men's 45s (>45)	Men's 50s (>50)	Men's 55s (>55)

Proposed Women's Teams:

Women's (>35)	Women's Non-Contact (>35)

Club President

Name: _____

Mobile: _____ Email: _____

Club Secretary

Name: _____

Mobile: _____ Email: _____

Club Treasurer

Name: _____

Mobile: _____ Email: _____

Club Delegate

Name: _____

Mobile: _____ Email: _____