

## 2021 WABL Team Player Information Form

The information contained in this form will be shared with your Perth Redbacks team coach, assistant coach and manager. If any information changes during the 2021 WABL season, please provide an updated form. All forms will be shredded at the conclusion of the season.

Players Name:		Birth Date:	
Address:		Suburb:	
Email Address: (Please provide players email and mobile if yo	ou would like communication to go direc	Mobile Phone:	
(	- · · · · · · · · · · · · · · · · · · ·	,	
Parent Name:		Home Phone:	
Email Address:		Mobile Phone:	
Parent Name:		Home Phone:	
Email Address:		Mobile Phone:	
Emergency contacts for when pa	rent/ guardian cannot be re	ached.	
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Name:	Phone 1:	Phone 2:	
Relationship to player:			
Name:	Phone 1:	Phone 2:	
Relationship to player:			
Please list player allergies:			
Trease list player unergies.			
Please list other medical conditi	ons:		
Please list any other information	n coach or manager should be	e aware of:	