



APPLICATION FOR FAMILY DISCOUNT

Winston Hills Football Club

PO Box 15 WINSTON HILLS 2153

Phone: 0418 634 287

Email: secretary@whsc.com.au

APPLICANT (Over 18)

NAME

PHONE

EMAIL

REGISTERED PLAYERS &
AGE GROUP

NAME

AGE GROUP

I, the Applicant, wish to apply for a family discount from Winston Hills Football Club based on the above registered players.

I would like the fee refund paid to the following account:

BSB	ACC #
ACC NAME	

SIGNATURE OF APPLICANT

DATE

CLUB USE ONLY:

DISCOUNT AMOUNT

APPROVED BY

PAYMENT DATE

PAYMENT DETAILS