



Garden State Netball Club  
272 Lincoln Street  
East Orange, NJ 07017  
973.556.1598

## Membership Packet

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Introduction

Application

Medical Form

Profile Info

Agreement

Please read **ALL** of the contents thoroughly and with accuracy as you will be responsible for the information within. Full time members must fill in, sign and return pages 2, 3, 4, 5 and 6 to complete the process. Part time members must fill in, sign and return pages 2 and 6 to complete the process. You will be given a GSNC Handbook to read in addition to the GSNC By-Laws no later than two months after submitting your signed membership packet. If you no longer wish to become a member, please return this membership packet in its original condition.



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## Introduction

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Garden State Netball Club offers two types of membership: full time and part time membership. Within these two memberships there are two categories: Adults (17 years and older) and juniors (under 17). We accept applicants from ages 10 and up provided they understand and comply with our standards. Below you will find the requirements for full time members and part time members. Please read carefully so that you can make the right choice appropriate for you. Once you have chosen a membership it will be fixed for six (6) months and you will be obligated to fulfill the requirements of your initial choice.

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### *Full time members*

- Participate in the netball training, matches, fundraising and volunteering.
  - Understand that all training sessions are considered mandatory and:
    - Player is allowed only 2 excused absences per month without reason
    - Any excuses in excess of 2 should be told to captain/coach and may affect match participation
  - Must wear correct training attire at all times and wear the correct fundraising or volunteer uniform when necessary.
  - In case of an absence, will contact the secretary and the captain via phone, e-mail or text, anywhere from 1 hour to one day prior to practice and will contact the coach/captain three days prior to a match.
  - If you are absent from three consecutive practices without call or notice it is assumed that you have voluntarily quit and your membership will be terminated. You will be eligible to reapply after 6 months.
  - Must be present at all monthly meetings.
  - Until we have a juniors team, juniors will not play in matches or travel however, if a junior would like to show up at matches in uniform, she will responsible for the total cost of the uniform and will travel with the team.
  - Registration fee \$20, monthly fee due at meetings \$15
  - Must read Handbook & By-Laws for further instructions on conduct, standards, rules etc
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### *Part time members*

- Only participate in the netball aspect of the organization e.g. no volunteering, no fundraising and no meetings.
- Must wear correct training attire at all times.
- Do not get the benefits given to playing members such as insurance, sports bags, travel expenses, meals at matches.
- Registration fee \$15, monthly fee due the first week \$5
- Must read Handbook & By-Laws for further instructions on conduct, standards, rules etc







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## Medical Form

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Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Last First mm/dd/yyyy

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1. Do you currently have insurance?  Yes  No
2. Is insurance provided through work?  Yes  No
3. What is the name of your insurance company: \_\_\_\_\_

Garden State Netball Club is insured by National Union Fire Insurance Company of Pittsburgh, PA and all club members, spectators and anyone participating in activities sponsored and supervised by GSNC are covered by our Blanket Accident Insurance. This includes traveling with the group in connection with such activities.

Payment of Medical Claims: Upon receipt of due written proof of loss, benefit payments for charges You incur for covered medical services will be made directly to the provider. If You paid any such charges, the benefit payment for those charges will be made to You upon written proof of payment.

A copy of this insurance policy is available upon request as soon as one becomes a member.

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### *Primary Care Physician (Doctor):*

Name: \_\_\_\_\_  
Last First

Business: \_\_\_\_\_  
Street Address City State Zip

Phone: \_\_\_\_\_  
Office Cel



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## Profile Info

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Located on our web site is a section for members' profile and this is where you share the basics about yourself with our supporters. You can be as vague or as in depth if you choose to. Please submit a digital picture via e-mail or usb pen drive to Kessia (kwilliams@gsnbc.org) to complete your profile. This is not mandatory but recommended.

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Name:

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Nationality:

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Hobbies:

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Interests:

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Music you like:

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Your own favorite phrase:

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What part of the world would you like to travel to:

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Why?:

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Something unique about yourself:

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