

## Club Release and/or Join Application

Request a release from your existing Club and/or request membership to a new Club.

**Note:** The person submitting this form must be the VQ member requesting this action or the parent/guardian of the member if under 18 years.  
No third party can submit this form on behalf of the member.

**Today is**

27-01-2020 at 5 : 28 PM

Date

Hour

Minutes

022515

Please select a club from **at least one** of the following two dropdowns.

**Existing Club \***

Select the VolleyBall Club you wish to be released from.

**New Club \***

Select the VolleyBall Club you wish to become a member of.

VQ's web page showing methods of [contact for each VQ Affiliated Club](#).

**Given Name \***

**Preferred Given**

**Middle Name(s)**

**Family Name \***

**Nee**

**Gender \***

- Male  
 Female

**VQID**

If known

**Date of Birth \***

▼    ▼    ▼

Day

Month

Year

**Age**

**Age Category**

**E-mail Address \***

Confirm E-mail

example@example.com

**Phone number \***

10 digits only

**Notes**

Please provide any additional information that may be relevant to this application.

0/152

**ID Photo \***

Please supply a **photo** or **scan** of an official form of **identification**. e.g. driver's licence or student Id. As a png or jpg.

Browse Files

.png .jpg only

**Members under 18 years Please fill in Parent/Guardian details**

**Parent/Guardian Name \***

**Parent/Guardian Phone Number \***

P/G Given Name

P/G Family Name

**Parent/Guardian E-mail Address \***

Confirm E-mail

example@example.com

**Parent/Guardian Authorisation \***

I agree with this transfer request.

Member Declaration

I declare I am the member stated as making this application or if under the age of 18 years I am the parent/guardian of the member in this application. That all the information I have provided is complete and correct and submit this application in good faith.

**Member Declaration \***

I agree to the above declaration.

Summary of Input

From Club	Name	Age	Phone
Select the VolleyBall Club you wish to be released from.		0	
To Club	Email		
Select the VolleyBall Club you wish to become a member of.			

After clicking Submit, please wait for the Thank You page