



AUSTRALIAN FIJIAN RUGBY LEAGUE

PO Box 791
Botany NSW, 1455

www.afrl.com.au

Australian Fijian Rugby League Membership Form 2011

Name _____

Date of Birth: ____/____/____

Player *

Social member

*Team playing for 2011

Address: _____
(Street Name & Number)

_____ (Suburb and Post Code)

Email Address: _____

Phone Number: _____

Mobile: _____

Occupation: _____

Sign.....Date.....

Please enclose cheque/money order for \$10

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