



JOONDALUP NETBALL ASSOCIATION

Joondalup Sports Clubrooms
25 Kennedy Dve
Joondalup WA 6027

Ph: 9301 4495
Office Hours:
Tues, Wed & Thurs 9.30am – 5pm

2026 APPLICATION FOR AFFILIATION and CONTACT INFORMATION

I, _____ on behalf of the
_____ Netball Club/Team

Hereby apply for affiliation to the Joondalup Netball Association (Inc.) for 2026

As a requirement of affiliation with Joondalup Netball Association, our club or team and our members agree to:

- Pay affiliation fees levied by Joondalup Netball Association for each Club/Independent team and for all individual members of the Club or Team, by 15TH SEPTEMBER 2026
- Be a financial member of Netball WA.
- Be compliant with Joondalup Netball Association Constitution, By-Laws, and Policies.
- Be complaint with all Netball WA & Netball Australia Policies.
- All clubs that have 4 or more teams are required to be incorporated.

I understand that as the club/Independent team contact, my details will be kept on file at JNA and passed on to Netball WA for the purpose of receiving information regarding courses, development, and netball related matters. I understand that my contact details will also be placed onto the Joondalup Netball Association website.

JNA require each club to nominate three contact persons. **These people will be the ONLY people that are authorised to make enquiries or changes with regard to any matters to do with your club.**

WHAT IS EXPECTED OF THE CLUB CONTACT

Club contacts are the liaison between the Club and Association and must be contactable, by phone or email. As a contact person for the Club, you are responsible for the following:

- ☛ Check for any information or notices located at the match office on a **weekly basis** and pass these on to **all Club members** – note collected items must be signed for by one of the contacts;
- ☛ JNA's main form of contact will be via email & our website. We also utilise social media. Please **check your emails** & the JNA website on a **weekly basis** to receive any correspondence & information from the Association and pass these on to **all Club members**.
- ☛ To pass on all information relating to the competition, courses, meetings, development and netball related matters to **all Club members**;
- ☛ To notify the JNA Office and Match Office of any forfeits, by emailing a "Notice of Forfeit". Also please notify your club umpire and the opposition club or team's contact within the required time frame.
- ☛ To be available on Competition Days/Nights, to discuss any matters pertaining to the Club during the competition;
- ☛ Arrange for at least one Club delegate to attend compulsory meetings (penalties will apply for non-attendance).
- ☛ Liaise between your club members/parents and the Association as required. Only the nominated club contacts have the authority to make/advise changes or make enquiries that specifically relate to your club.
- ☛ To advise JNA whether all of your members are a YES or NO for photography consent.

As the official contact/s of the Club all correspondence will be addressed to you, should you be unavailable (holidays etc) at any certain time, please notify the office of a replacement email and contact details.

CLUB CONTACT DETAILS (PLEASE PRINT CLEARLY)

Contact No 1

NAME: _____

ADDRESS: _____

TELEPHONE: _____ MOBILE: _____

EMAIL: _____

POSITION HELD AT CLUB: _____

Contact No 2

NAME: _____

ADDRESS: _____

TELEPHONE: _____ MOBILE: _____

EMAIL: _____

POSITION HELD AT CLUB: _____

Contact No 3

NAME: _____

ADDRESS: _____

TELEPHONE: _____ MOBILE: _____

EMAIL: _____

POSITION HELD AT CLUB: _____

I would like all e-mail correspondence to be sent to (**please circle below**):

All contacts as above – YES/NO

OR

Contact No. 1 only – YES/NO (If this option is selected, please advise office when to use one or more of the other contacts)

**NOTE: SHOULD THESE DETAILS CHANGE,
PLEASE ADVISE THE ASSOCIATION AS SOON AS POSSIBLE.**

I have been authorised by our Club/Independent team to complete this form, and, having completed it to the best of my knowledge, confirm that our Club/Independent team agrees to and will comply with JNA's Membership & Affiliation Procedures and Membership policy and all other policies and guidelines from JNA, Netball WA and Netball Australia as they apply to my Club/Independent team. I confirm that I have read and understood these obligations as stated on this form.

Signed: _____ Date: _____

NAME: _____ (Print clearly)