

# Junior Registration Form

## General Information

Football Club: \_\_\_\_\_

Have you previously been registered with another club? Yes ☐ No ☐ **Note:** If Yes a clearance may be required

Previous Club: \_\_\_\_\_

## Participant Information

Surname: \_\_\_\_\_ Male ☐ Female ☐

Given Name(s): \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age Group: ☐ Y4s ☐ Y5s ☐ Y6s ☐ Y7s ☐ Y8s ☐ Y9s ☐ Y10s ☐ Y11s ☐ Y12s

Place of Birth: \_\_\_\_\_

Ethnicity: \_\_\_\_\_

Birth Certificate: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Postcode:

Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Email: \_\_\_\_\_

School: \_\_\_\_\_ School Grade:

AFL Team: \_\_\_\_\_

Would you like to earn extra money by Umpiring Junior Football (Must be at least 13 years of age)? Yes ☐ No ☐

## Parent / Guardian Information

Surname: \_\_\_\_\_

Given Name(s): \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Will you be willing to assist the club in a volunteer role? Yes ☐ No ☐

Area of interest: Coaching ☐ Runner ☐ Administration ☐ Goal Umpiring ☐ Social Committee ☐  
Canteen ☐ First Aid ☐ Fund Raising ☐ General Helper ☐

## Medical Information

Does your child suffer from any medical conditions, including: illness, disability or allergies? Yes ☐ No ☐

Details: \_\_\_\_\_  
\_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

In an emergency, do you authorize the Junior Football Club to arrange any necessary medical treatment for your child where prior notification has not been possible? Yes ☐ No ☐

**Note:** Please use free space on page 2 to provide any further information

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## Privacy Policy

### Privacy Policy

Personal information collected by the Junior Football Club is for the primary purpose(s) of membership requirements, competition purposes and football development. It will not be released for any form of commercial gain and will be maintained in a secure environment as per the requirements of the Privacy Act. Completion and lodgment of this Registration Form indicates acceptance of the Club's policy.

I am aware that recording images of children participating in football both photographic and video graphic is not permissible without the consent of the child's parent or guardian. I am aware that a team photograph or other image may be produced during the football season by a club or governing body and may be utilized for the promotion and development of football by the governing body.

### Waiver and Indemnity

**Football** - Means Australian Rules Football, **Club** - Means the Football Club, **League** - Means the Football League, **Child** - Means child or ward

I am aware that playing Football, observing Football, learning to play Football and training to play Football, and participating in any activity carried out by the Club, are activities that inherently involve risk, and that in undertaking the activities my child does so at his/her own risk.

I am also aware that, as a condition of my child's admission to membership of the Club, its office bearers, officials, coaches, managers, umpires, members, and/or agents are absolved from all liability arising from injury or damage howsoever caused. That injury or damage may arise out of membership of the Club, playing Football, observing Football, learning to play Football and training to play Football, or negligence of any nature whatsoever on the part of the Club or League, their representatives, office bearers, officials, coaches managers, umpires, members, and/or agents.

I understand and agree that nothing in this agreement purports to exclude any liability that may be owed by the Club or the League and their representatives pursuant to the provisions of any relevant Statutory Act/s covering these activities. To the extent that any part of this agreement may contravene any of the Statutory Act/s I agree that part of the agreement may be severed and rendered void but the rest of the agreement will remain valid and continue to have effect.

**I Do hereby acknowledge that of my own free will and desire, I have contracted with the Club for the instruction, training and playing of my child in Football and that I have read and understood the above waiver.**

I am willing to receive information regarding junior football in my district

Yes

☐

No

☐

Signed (Parent/Guardian):

Date:

\_\_\_\_/\_\_\_\_/\_\_\_\_

Signed (Club Official):

## Additional Information

Please include any extra information in this space.

Please attach photographic ID where required

Place  
Photograph  
Here

## Receipt of Payment

Surname: \_\_\_\_\_

Given Name(s): \_\_\_\_\_

Amount Received \$    Cash ☐ Cheque ☐ Other ☐

Signed (Club Official): \_\_\_\_\_