



Alyangula After School Program

Registration of Interest, Consent/Waiver/Media Release Form

Please email this completed form to gwen@bushfitmob.com.au or hand to Vanessa McInnis.

Each child MUST BRING a water bottle.

Registration for:	Alyangula After School Sport, Dance, Martial Arts, Music and other Recreation Activities.		
Child's Name		Age	Gender
Teacher		Grade	
#1 Emergency Contact Name		Phone #	
#2 Emergency Contact Name		Phone #	
Pre-existing Medical Conditions, please provide details:			
Sports that appeal most to your child (please tick box/es):			
<input type="checkbox"/> AFL	<input type="checkbox"/> Golf	<input type="checkbox"/> Soccer	<input type="checkbox"/> Tennis
<input type="checkbox"/> Athletics	<input type="checkbox"/> Futsal	<input type="checkbox"/> Softball	<input type="checkbox"/> Volleyball
<input type="checkbox"/> Basketball	<input type="checkbox"/> Hockey	<input type="checkbox"/> Table tennis	<input type="checkbox"/> Other, detail: _____
<input type="checkbox"/> Cricket	<input type="checkbox"/> Netball	<input type="checkbox"/> Tee-ball	
Any comments:			
Volunteer/Parental Assistance : These programs require parental assistance to enable as many children as possible to participate and enjoy these programs. Would you like to volunteer on a regular basis? Yes / No Please circle days that you could volunteer on in your child's session: Tuesday Wednesday Friday			

Consent/Waiver Agreement:

Engagement in sport and recreation activities always an element of risk (eg. Accidental injury during match play). As part of the day to day process of running the Bush Fit Mob program, we endeavour to maintain a safe environment for all participants – whereby any participant/parent are to promptly adhere to any safety directions from our staff.

You acknowledge that there is an element of risk to your child in participating in sport & recreation activities. You acknowledge it is your responsibility to advise Bush Fit Mob staff of any medical conditions that may place your child at risk in various activities (please detail below). You agree that that Bush Fit Mob is not responsible for injuries, damage or loss suffered as a result of Bush Fit Mob activities involving you or your child.

Additional Details: _____

I, _____ (Parent/Guardian name) **give my consent and fully comprehend**
the risk inherent in _____ (Participant name) **participating in Bush Fit**
Mob sport and recreation activities.

Signed

Date

