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|------------|-----|--|------|
| RSL Member | Y/N | | PAID |
|------------|-----|--|------|

| | | | |
|-------------------|-------------|------------------|-----------------------------------|
| Child 1 | | | |
| Surname | | Allergies | |
| Given Name | | | |
| Date of birth | M / F | Medications | |
| School | | | |
| CENTRE USE | Rego | Age group | Act Seniors Registration ? |
| Last Season | Yes No | POA Yes No | |

| | | | |
|-------------------|-------------|------------------|----------------------------------|
| Child 2 | | | |
| Surname | | Allergies | |
| Given Name | | | |
| Date of birth | M / F | Medications | |
| School | | | |
| CENTRE USE | Rego | Age group | Act Seniors Registration? |
| Last Season | Yes No | POA Yes No | |

| | | | |
|-----------------------|------------|---------------------|----------------------|
| Parents Name | | | |
| Address | | | |
| Email address | | | |
| Phone | | Mobile | |
| Ambulance Fund | Y/N | medical fund | Y/N fund name |

PARENTAL /GUARDIAN AUTHORISATIONS

1. In Registering the Above named Athlete/s, I the Legal Parent/Guardian, Agree to the Centre or ACTLAA seeking emergency medical treatment if so required. I acknowledge I should seek from my Centre details of the type of insurance covered
2. Personal Information Collected on this form is collected by the centre on behalf of ACTLAA. You may be contacted by the centre or ACTLAA to provide information on little athletics activities
3. I Agree that Goulburn-Mulwaree Athletics Inc and its officers and/or agents shall be released from and shall not incur any responsibility whatsoever for any accident or injury to the above named athlete/s or for the loss or damage to property of the athlete/s
4. I understand it is a condition of registration, that I must remain on the ground while my/our child/children are competing. I also understand that Goulburn Mulwaree Athletics Inc is wholly run by volunteer parents and that the assistance of other parents is required to successfully run the events.
5. I DO/ DO NOT give my permission for my child's photograph to be used during our end of season Presentation night and/or to be used in the Goulburn Post for publicity on Little Athletics activities.

Signature

Date