



Enrolment Form 2018/2019

<i>Office Use Only</i>
Date Paid.....
Payment Method: Cash / DD /eftpos

1. Family Contact Details

Family Name			
Parent/Carer 1		Parent/Carer 2	
Mobile		Mobile	
Email		Email	

2. Registration

	Name	D.O.B	M/F	School
Child 1				
Child 2				
Child 3				
Child 4				

3. Medical and Emergency Contact Details

Are there any medical conditions that we need to be aware of? **YES/NO** If Yes, please complete Medical form

Emergency contacts other than above

Name		Relationship		Mobile	
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4. Payment

Child x 1	\$75
Child x 2	\$90
Child 3 or more	\$105
Pups only	\$30
Wobbies Bucket Hat – Qty:	\$
TOTAL	\$

Payment Method – Please tick	
<input type="checkbox"/>	Cash – Sign on and club nights only
<input type="checkbox"/>	Eftpos – Sign on and club nights only
<input type="checkbox"/>	Direct Deposit Ref: WWSC-Surname BSB 064-114 Acc 10189711 Email receipt to Wobbegongs.wss@gmail.com

5. Volunteering

The Swim Club relies entirely on the generosity of volunteers for the running of club nights, carnivals and other events. All member families will be rostered to perform volunteer duties throughout the season. Please circle your preferred areas

Time keeping Marshalling Starter MC Sausage Sizzle Canteen

6. Parent/Guardian Declaration

- As a parent/guardian I give consent for my child/children to participate in the swim club activities.
- I agree to abide by the Club rules which I acknowledge is available to me on the swim club website
- I acknowledge that my child/children must be accompanied and supervised by an adult (parent/guardian or authorised person) for the duration of the club night. Children who are not accompanied and supervised by an adult during club night, cannot compete.
- I agree that while WWSC officials and WSS P&C Association will take all responsible precautions to provide a safe venue for my child/ren, the officials will not be held liable for any personal injury or damage to property which may occur during or arising out of the presence within the confines of the pool area of any person whatsoever.
- I accept full responsibility for my child/ren whilst on WSS premises.
- I give permission for WWSC to publish information / photos of my child/ren for publicity or swimmer profiles (e.g. swimmer of the week / club nights and carnivals).
- I agree to indemnify and keep indemnified the officials, officers and any other persons or parties undertaking activities on behalf of WWSC in connection with medical attention for my child/children, against any loss or expense as a result of any activities and outgoings incurred relating to the club.

Signature

Print Name

Date