



## PARTICIPANT BOOKING FORM

### **PARENT/GUARDIAN**

FIRST NAME					LAST NAME								
PHONE					<b>EMAIL</b>								
EMERGENCY CONTACT							PHO	ONE					
CHILD 1													
FIRST NAME					LAST N	AME							
D.O.B					GENDE	2							
ALLERGIES		NO		YES. Please list:									
MEDICAL		NO		YES. Please list:									
LEARNING		NO		YES. Please list:									
DIFFICULTIES OTHER. Please	pro	vide ot	her	information that									
we may need 1	-												
CHILD 2													
FIRST NAME					LAST NA	ME							
D.O.B					GENDER	2							
ALLERGIES		NO		YES. Please list:									
MEDICAL		NO		YES. Please list:									
EARNING		NO		YES. Please list:									
DIFFICULTIES		الم مادان											
we may need t	_			information that									
CHILD 3													
FIRST NAME					LAST N	AME							
D.O.B					GENDE	2							
ALLERGIES		NO		YES. Please list:									
MEDICAL		NO		YES. Please list:									
LEARNING		NO		YES. Please list:									
DIFFICULTIES													
OTHER. Please we may need t													
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### TERMS AND CONDITIONS

- I have informed the YMCA of any additional assistance my child may need
- I declare that the information provided by me on this form is true and correct.
- I give consent for YMCA staff to administer first aid
- I understand that photos may be taken by the YMCA for promotional purposes.
- I have read and understand the sporting programs you participate in; and have the bylaws and codes of conduct. I acknowledge that not following the codes of conduct may result in de-registration in YMCA sporting programs.
- Overdue pick up will incur an additional fee of \$30 per half hour after 4:30pm

#### 1. Payment must be made at time booking. Places will not be held without payment.

- 2. Payments can be made at reception (Kilgariff Recreation Centre) or over the phone.
- 3. I give my consent for my child/ren to participate in all activities organised by Kilgariff Recreation Centre.
- 4. Kilgariff Recreation Centre reserve the right to expel a participant if their behaviour jeopardises the safety and wellbeing of staff and other children. Bullying will not be tolerated. Children will be removed from the group for short period of time, if it continues parent will be contacted to collect child.
- 5. Children must bring their own lunch, morning tea and afternoon tea. We are a nut & egg free centre so all food must not contain traces of these products.
- 6. Enclosed shoes must be worn at all times. NO THONGS OR SANDALS are allowed.
- 7. In the event of accident or illness, I authorise medical treatment for my child and the associated costs. Food allergies need to be noted above, together with any procedures that need to be taken.
- 8. I acknowledge & agree that my child/ren is/are between the ages of 5-12years and is enrolled in primary school.
- 9. Credit or Refunds are not given where cancellation is within 48 hours of the child's selected days.

  Cancellations made with more than 24 hours' notice will be eligible for family credit to be used in the future.

  Exceptions for the above are made for extreme circumstances at the discretion of management.
- 10. I am aware of the inherent physical risks in taking part in all activities.
- 11. All activities are subject to change without prior notice.
- 12. A Parent or Guardian must sign their child/ren in and out of the Action Break program every morning and afternoon. If someone who is not indicated on the registration form is picking up the children please alert the staff when dropping off.
- 13. I understand that the Kilgariff Recreation Centre accept no responsibility for lost or damaged items such as clothing, money, electronic devices.
- 14. I understand that Kilgariff Recreation Centre may take photographs and videos in connection with the program for YMCA NT. I understand that these may be used for advertising purposes for the Sports and Games programs and that I can revoke these permissions at any time.
- 15. Children are encouraged to bring spare change of clothes in case first set of clothes become unwearable 16. If children come to the program in unsuitable clothing, they may be unable to participate in activities.

PARENT/GUARDIAN NAME	
PARENT/GUARDIAN SIGNATURE	
DATE	the <b>E</b>