

## Christian College Netball Club – Return this form to school.

If your child intends to play in the Term 1 Junior School Competition please return the following registration form to Ms. Renee McCance by Wednesday February 8.

Please print the details below.

Student's Name:	
Homeroom:	Gender: Male <input type="checkbox"/> or Female <input type="checkbox"/>
Age: ( Student turns in 2012)	Date of Birth:
Home Phone number:	Mobile number:
Emergency Contact Name:	
Emergency Contact Number:	
Parent email address for Information – <b>please print clearly below</b>	

As a parent/guardian I understand and acknowledge that the sport of Netball does involve some degree of risk and that physical injury or death is a possibility when participating. I understand and accept the risks associated with Netball, and give permission for:

- My child to participate fully in any activity the coach/teacher asks of him/her.
- The coach, a parent or a teacher from Christian College to administer first aid as they deem necessary.
- The use of an ambulance and/or anesthetic by a qualified medical practitioner if in his/her judgement it is necessary.

I understand that any medical or other costs incurred will be met by me.

- I agree to the sum of \$28.00 (Year 1 & 2 students) or \$42.00 (Year 3 & 4) being added to my Term 2 Fees for being involved in the Junior School Netball program.

Parent's signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Volunteer Assistance

Parents Name:
I can assist the Christian College Netball Club as a (please tick): Team Coach <input type="checkbox"/> Team Manager <input type="checkbox"/> Scorer <input type="checkbox"/>