

# Wallaroo Football Club

P.O. Box 106, Wallaroo S.A. 5556

Junior Email - wallaroojfc@gmail.com



## Player Registration 2015 Season

### PLAYER DETAILS

Player Full Name

Date of Birth

Sex

Male/Female

Address

Email Address

Player Mobile

Home Phone No.

### PARENT/GUARDIAN CONTACT DETAILS

*For all players under the age of 18 years*

Parent/Guardian

Relationship

Parent Mobile

Home Phone No.

### EMERGENCY CONTACT DETAILS

*The information below will be maintained by the Wallaroo Football Club Committee & Coaches for emergency use only.*

Name

Relationship

Mobile Number

Home Phone No.

Name

Relationship

Mobile Number

Home Phone No.

### MEDICAL DETAILS

*Please provide sufficient information to ensure player safety, please discuss appropriate action plans with Coach, Team Manager and/or Trainers*

Medicare No

Ambulance Cover

YES / NO

Private Health Insurance

YES/NO

Fund Name

Membership No.

Doctor

Medical Issues of Relevance

Medication of Relevance  
and Treatment Plan

PLEASE LIKE THE WALLAROO FOOTBALL CLUB FACEBOOK PAGE, TO KEEP UPTO  
DATE WITH CLUB INFORMATION AS IT COMES TO HAND.



## AGREEMENTS AND PERMISSIONS

### CODE OF CONDUCT AGREEMENT

I as a player/coach/team manager/umpire/spectator of Wallaroo Football Club have read, understand and agree to abide by the Wallaroo Football Club code of conduct terms and conditions as per attached.

Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

I as the guardian of \_\_\_\_\_ have discussed the Wallaroo Football Club code of conduct as attached, and ensure his/her understanding of what this agreement requires.

Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

### SEASON FEES AND PAYABLE AGREEMENT

I agree that the Wallaroo Football Club and its officers and servants are free and clear of all responsibility for any accident or illness which may befall or occur to my child during their participation in any football activity. I agree to and hereby indemnify the club, its officers and servants from and against any damages, claims or demands in respect thereof. In the event of the above, I authorise you to obtain whatever help you may feel necessary and agree to pay all debts incurred on behalf of my child.

Grade	Registration Fees	Indicate Grade (Please Tick)
Under 10's (Under 10 years of age as at 01/01/15)	\$25.00*	<input type="checkbox"/>
Under 12's (Under 12 years of age as at 01/01/15)	\$30.00*	<input type="checkbox"/>
Junior Colts (Under 14 years of age as at 01/01/15)	\$30.00*	<input type="checkbox"/>
Senior Colts (Under 17 years of age as at 01/01/15)	\$35.00*	<input type="checkbox"/>
*Please note Registration Fee includes \$5.00 toward end of year Coaches Gifts.		

Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

### PHOTOS (ALL DIGITAL MEDIA) AGREEMENT

I consent to video footage/photos/other images of my child taken by the Wallaroo Football Club (WFC), the Yorke Peninsula Football League (YPFL) or a person acting on their behalf, for a variety of public relations, communications and promotional activities, including for publications, promotional material, websites and advertisements, for an undefined period of time. I acknowledge that any recording and/or performance of my child in connection with promotional activities made by the WFC or YPFL is an authorised use of my child's performance for the purposes of the Copyright Act 1968. I release the WFC and YPFL from any claim by me or anyone on my behalf and arising out of my child's appearance in promotional activity. I acknowledge that there will be no payment or further consideration paid for my child's performance.

Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

I as guardian of \_\_\_\_\_ agree that any photographs taken of my child can be use in a positive manner for the good of football.

Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

### PLAYING UP AGREEMENT

I as a parent/guardian of a junior player of the Wallaroo Football Club have read, understand and agree to abide by the playing up a grade policy code terms and conditions attached.

I as guardian of \_\_\_\_\_ agree/disagree to allow him/her to play up a grade at the discretion of both coaches.

Permission Granted Yearly YES ☐ NO ☐

Permission Granted Weekly YES ☐ NO ☐

Signature: \_\_\_\_\_

Dated: \_\_\_\_\_