



# Kogarah RSL Sub-Branch/Youth Club

## MEMBERSHIP APPLICATION FORM      **2018**

Youth Club Applicant/s

Family Name: - \_\_\_\_\_

Mem No	First Name	DOB	Medical Conditions	Previous Injuries	Allergies	Activities at club

### Parent/Guardian Contact Details

Name \_\_\_\_\_ Address \_\_\_\_\_ Suburb \_\_\_\_\_ P/c \_\_\_\_\_

Home Ph: \_\_\_\_\_ Mob Ph: \_\_\_\_\_ Email \_\_\_\_\_

#### Indemnity

I agree that the member/s registered will abide by the Youth Club rules.

I will not hold Kogarah RSL Sub-branch youth club responsible for any accident or mishap.

I have read and understood the clubs code of ethics, and I agree to abide by them whilst a member of the club

I have read all the information regarding commitments, fees etc, and I consent to my son/daughter enrolling in the Youth club.

#### **GYMNASTICS and DANCE**

**PARENTS ARE RESPONSIBLE FOR INSURING THEIR CHILDREN AS ACCIDENT CAN HAPPEN AT ANY TIME THROUGH NO FAULT OF THE COACHES**

I give permission for my Daughters/Sons Name or Image to be published by the youth club      YES/NO please circle

Signature \_\_\_\_\_ Date \_\_\_\_\_