Randwick Netball Club

Registration form

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| --- |
| Participant Details |
| First Name: |  |
| Last Name: |  |
| Date of Birth: |  |  |
| Home Address: |  Postcode: |
| Home Telephone No: |  | Own mobile: |
| Email address: |  |
| Positions Played: |  |  |
|  |  |  |
| Emergency Contact Details |
| Name: |  |
| Relationship: |  |
| Address (if different from above): |  |
| Email address: |  |
| Contact Telephone Numbers: |  |
|  |  |  |
| Details of Medical Details |
| Details of any special needs, medical conditions, allergies etc: |  |
| Name of family Doctor: |  |
| Doctor’s Telephone No: |  |

Declaration

1. I understand that whilst coaches and personnel leading the activities will take every precaution to ensure that accidents do not happen, they cannot necessarily be held responsible for any loss, damage or injury suffered by myself.

Signed: …………………………………………………………… Date …………………………….

Name (please print): ………………………………………………………………