

2020 SOCCER REGISTRATION & CONSENT FORM



Hallett Cove East

Primary School

*****Note: Please write clearly *****

PLAYER DETAILS

Student's Name: _____ Age: _____ M/F: _____

Address: _____

Date of Birth: _____ Classroom Number: _____

Teacher's Name: _____ Year Level: _____

School (if not HCEPS) _____

CONTACT DETAILS

Contact Person One: _____ Phone: _____ Mobile: _____

Criminal Check Completed: YES/NO Volunteer Training Completed: YES/NO

Contact Person Two: _____ Phone: _____ Mobile: _____

Criminal Check Completed: YES/NO Volunteer Training Completed: YES/NO

Email: _____

PREVIOUS SOCCER EXPERIENCE

Previously Played School Soccer: YES / NO

If Yes, Last Team Played for & Year: _____ (e.g. Under 11 2019)

Comments re Team/Age Group Preference in 2020: _____

(Optional - any comments re preferred age group/coach/team etc)

Club Soccer: Does your child play soccer for a club? YES / NO (for FFSA Levy purposes)

If Yes, Club: _____ Age/Team: _____

MEDICAL INFORMATION

Does your child have a Student Asthma Record Card? YES / NO

Does your child wear glasses for sport? YES / NO
(NDJSA have a policy re wearing glasses in matches)

If there is any medical information that is relevant to the student's participation in this activity, please provide details: _____

MEDICARE NUMBER: _____ (This **MUST** be completed)

ASSISTANCE IN 2020

We cannot offer Soccer at the school without significant parent help. If coaches, assistants, and team managers do not come forward, teams will not be registered and players will miss out. Please note that all coaches, assistants & team managers are required to have a current police check. A copy of this will be required prior to commencing any training.

If you are able to help with any of the following tasks, please circle below:

Committee	Coaching	Asst Coach	Team Manager	Linesperson
BBQ Coordinator		Saturday Morning Set-up		

ACKNOWLEDGEMENT & CONSENT

I give permission for my child to be involved in both training and matches for the above Sports Team. I am responsible for the transport of my child to and from match and practice venues.

I acknowledge that I am responsible for the payment of registration fees directly to the school finance office prior to the end of term 2. This includes any unpaid fees from previous seasons.

I accept responsibility for the care of my uniform or equipment loaned to my child and its return, (cleaned) at the end of the season. If I do not return the loaned uniform I am aware that I will be invoiced for the replacement of that uniform.

I understand that the Coach/Manager is authorised to obtain medical assistance for my child if deemed necessary and I/we agree to pay any medical, hospital and ambulance expenses incurred.

All players and parents/caregivers/guardians acknowledge that they participate in school sport under the school's "Code of Behaviour" policy. All players and parents/caregivers/guardians acknowledge that they also participate in school soccer under NDJSA guidelines.

I understand that my child will automatically be enrolled in OSHC (the registration fee will be waived for soccer purposes) in case your child is not collected from training and I understand that I will be responsible for all OSHC fees incurred if this service is used.

I understand that all parents are required to assist with the canteen/BBQ as rostered by the team manager for home matches during the season.

Players Signature: _____ Date: _____

Parent's Signature: _____ Date: _____