



# 20\_\_/20\_\_ REGISTRATION FORM

**CENTRE:**..... **CENTRE NO:**.....

REGISTERED LAST SEASON **YES / NO** If yes, but with another Centre, please list here.....

## PARENT/GUARDIAN INFORMATION

Surname:..... Phone: (h) ..... (m) .....  
Mother's Name:..... Father's Name:..... Emergency Contact: .....  
Address:..... P/code: .....  
Email: ..... **NB.** By entering your email address you are consenting to receive LAANSW eNews

### CHILD NO. 1

Surname:..... Given Names:..... D.O.B. \_\_\_/\_\_\_/\_\_\_ Sex: .....  
School: ..... How long have you been a member of Little Athletics? ..... Years  
For statistical purposes only, please specify any disabilities: ..... **AWD Classification:** .....  
For dual registered athletes, please provide the **ANSW No:**.....

Centre use only: Type of Rego **NEW / RE / TRANSFER** Proof of Age sighted: **YES / NO** **AGE GROUP** **U** **B/G** **REGO NO.**  
Last year Reg. No. ....

### CHILD NO. 2

Surname:..... Given Names:..... D.O.B. \_\_\_/\_\_\_/\_\_\_ Sex: .....  
School: ..... How long have you been a member of Little Athletics? ..... Years  
For statistical purposes only, please specify any disabilities: ..... **AWD Classification:** .....  
For dual registered athletes, please provide the **ANSW No:**.....

Centre use only: Type of Rego **NEW / RE / TRANSFER** Proof of Age sighted: **YES / NO** **AGE GROUP** **U** **B/G** **REGO NO.**  
Last year Reg. No. ....

### CHILD NO. 3

Surname:..... Given Names:..... D.O.B. \_\_\_/\_\_\_/\_\_\_ Sex: .....  
School: ..... How long have you been a member of Little Athletics? ..... Years  
For statistical purposes only, please specify any disabilities: ..... **AWD Classification:** .....  
For dual registered athletes, please provide the **ANSW No:**.....

Centre use only: Type of Rego **NEW / RE / TRANSFER** Proof of Age sighted: **YES / NO** **AGE GROUP** **U** **B/G** **REGO NO.**  
Last year Reg. No. ....

## PARENT/GUARDIAN DECLARATION

(LAANSW\* Little Athletics Association of NSW ALA\*\* Australian Little Athletics)

As parent/guardian of the above-named athlete/s and in consideration of my child/ren attending Little Athletics, I: -

- Agree to abide by all LAANSW\* rules and regulations, including those pertaining to myself as parent/guardian and those relevant to the Centre, including general and specific codes of conduct.
- Agree to my child/ren being photographed and/or videoed at any LAANSW\* sanctioned event, such photos or video taken can be used for training purposes; official LAANSW\*/ALA\*\* sponsor/Centre publication; used on LAANSW\*/ALA\*\*/Centre approved photographer websites.
- Agree to the Centre and LAANSW\* keeping personal information on file in accordance with the LAANSW\* Privacy Policy. I acknowledge that I will review the Policy and will contact the LAANSW\* in writing, of any concerns about such Policy or where I do not wish the personal information of myself or my child/ren to be used for the purposes detailed. (The Privacy Policy can be viewed on [www.littleathletics.com.au](http://www.littleathletics.com.au)).
- Understand that although the LAANSW\* and its service providers attempt to minimise any risk of personal injury within practical boundaries, accidents do happen and all physical activities carry the risk of personal injury. I acknowledge that there is an inherent risk of personal injury in physical activities that will be undertaken. I release and hereby indemnify LAANSW\*, its officers, servants, agents and service providers from and against damages, claims or demands in respect thereof.
- Understand that annual registration fees are non-refundable.
- Confirm that I have NOT registered my child with another Little Athletics Centre for the current season.
- Verify that all details on this form are true and correct.

Parent/Guardian (block letters):..... Signature: ..... Date: .....

## CENTRE REGISTRAR DECLARATION

I verify that all athletes listed above have been placed in the CORRECT age group and that their proof of age documentation has been sighted by me or my representative: -

Centre Registrar: ..... Signature ..... Date .....

# INSTRUCTIONS

## General

1. Please complete form in biro or ink (do not use pencil).
2. Print or write clearly.
3. If more than three (3) children registering from the one family, an extra form is to be used.

## Parent/Guardian

1. This form **MUST** be completed by a parent or guardian, rather than the athlete.
2. Complete all details as fully as possible.
3. You **MUST** show a suitable form of proof of age document when registering your child. This can be a birth certificate (full or extract); passport or other similar legal document.
4. Please sign the form where requested.
5. If the surname of the child is the same as the parent, the words *as above* will be sufficient in each individual athlete box.
6. If the surname of the child is different to that of the parent/guardian (eg. foster parent etc), please complete each box with the correct surname inserted.

## Centre Officials

1. Centre Registrar/Officials should fill in registration season; Centre name and Centre number on top of each form.
2. Ask parent/guardian to complete all details as fully as possible.
3. Ensure parent/guardian has signed the parent declaration.
4. Complete **Centre Use Only** details fully using age group table provided and information given by parent/guardian.
5. If the athlete was registered with another Centre last season, please indicate on the form the previous Centre and registration number.
6. Ensure proof of age has been sighted **BEFORE** finalising registration.
7. Forward registrations to the Association office (address below) within twenty-eight (28) days.
8. Centre officials are responsible for the authenticity of proof of age documents.