MELBOURNE KNIGHTS FOOTBALL CLUB MINI KNIGHTS REGISTRATION FORM 2015

MOTHER'S/GUARDIAN'S D	EE	[A] J3]			
Surname	First Name			ST. 1953	
Address					
			Postcode		
Home Tel No		Mobile No			
Email					
FATHER'S/GUARDIAN'S DE	TAILS				
Surname First Name					
Address (if the same as the mothe	er's/guardian 1 details, write "As A	bove")			
			Postcode		
Home Tel No		Mobile No			
Email		I			
PARTICIPANT DETAILS					
1. Surname		Fee Payable			
Tick box		Birth date		\$	
JUNIOR MINI	SENIOR MINI	/	/		
2. Surname	First Name				
Tick box		Birth date		\$	
JUNIOR MINI	SENIOR MINI	/	/		
3. Surname	First Name				
Tick box		Birth date		\$	
JUNIOR MINI	SENIOR MINI	/	/		
NOTE: Mini Knights 2015 Soccer Program - \$1	TION FEES	\$			
		TOTAL PA	YABLE	s	

MEDICAL DETAILS								
Doctor's Name Ph		Phone No	Ambular	Ambulance Cover?				
			□ No □	Yes – Policy Number:				
Ple	ase provide details of all illnesses, injuries, disc	abilities and any medi	cation that any player	r represented on this form	n is using:			
IN CASE OF EMERGENCY (WHERE EITHER PARENT/GUARDIAN CANNOT BE CONTACTED)								
Name of relative or friend		Relationship	o to player	Home Tel No	Mobile No			
NOTES/CONDITIONS								
1.	Cancellation – Registration or part of the registration may be refunded if your child is unable to continue the program due to unforeseen circumstances.							
2.	2. Unforeseen circumstances include, but are not limited to – the cancellation of the training program or long term injury or illness.							
3. 4.								
PRIVACY								
The Club is committed to the privacy of its members. You have the right to access the personal information the Club holds concerning you or your children, and request correction of any errors.								
PARENT DECLARATION								
 2. 	expenses, any shortfall in the cost of obtaining urgent and/or continuing medical treatment incurred as a result of injuries suffered by our child whilst participating in the Mini Knights Soccer Program.							
3.	3. We consent, unless we otherwise advise in writing to the Mini Knights, to the use of our child/children's details including name and also image and likeness, before, during or after the season for promotional, broadcasting or reporting purposes in any media.							
4.								
5.	We acknowledge that soccer training is a contact sport and accordingly hold the Mini Knights harmless against all claims of whatsoever nature arising out of any injury, loss or damage suffered as a result of any child participating in any training capacity.							
6.	We agree to reimburse the Mini Knights for any loss or damage to equipment (this includes the playing strip) due to our or our child(ren)'s negligence.							
As parents/guardians of the above named players, we hereby acknowledge that we have read, understood and accept the rules and conditions stated above and verify that all details on this form are true and correct.								
	Parent/Guardian signature	Parent/G	Guardian signature		Date			