

# CIRCOBATS



## ENROLMENT FORM

The information on this form represents the legal rights and obligations of the person enrolling to participate in **CircoBats**.

If the person participating in circus activities is under 18 years of age this form must be completed and signed by a parent, or legal guardian of the participant enrolling in training and performing of Circus activities. **CircoBats** activities will not commence or be conducted by any party without a signed enrolment and disclaimer form for the designated period.

## PERSONAL INFORMATION

NAME (in full):		DOB:    /        /	AGE
ADDRESS:		SUBURB:	PO:
PH hm:	PH wk:	PH mob:	
eMail:		(Alt) eMail:	
GUARDIAN :		PH mob:	
PREFERRED METHOD OF CONTACT: Phone      eMail      Sms      Mail      (Please x)			
		<input type="radio"/>	<input type="radio"/>
Do you consent to being photographed or filmed by <b>CircoBats</b> for the purposes of promotional or archival recording.		Yes / No	(Please circle)

- Circus training and performance involve calculated risks by the very nature of circus arts and the equipment used.
- **CircoBats** staff will not pressure a participant to take part in an activity against his or her will.
- Safety is the most important consideration for an activity. Participants must listen to and follow instructions. Participants who do not do follow instruction from qualified personnel will be given two warnings and then be required to sit out for the remainder of the activity.
- Unsafe behaviour will not be tolerated.
- Participants will not use any CircoBats equipment, without permission &/or a trainer present.
- Attention distraction devices, such as *Mobile phones, Ipods etc*, will not be permitted to be used within the training area during sessions or performance.

**\*\*\*CircoBats will not accept liability for any injury, loss or damage during the course or associated with any circus activity or performance. Any person participating does so at their own risk.\*\*\***

## MEDICAL INFORMATION

Medicare Number:	GP:	Ph:
ADDRESS:	SUBURB:	PO:
Please advise any preexisting medical conditions, allergies or behaviours which may affect participation in any circus activities:		

This information is required to assist CircoBats staff and medical personnel in the event of an injury or medical crisis, and will only be used in accordance with Privacy Policy.

- It is the responsibility of the participant, or guardian if under 18yrs, to bring and administer any required medication.
- CircoBats does not keep medication on hand other than a standard first aid kit.
- In signing this form you give CircoBats staff permission to apply any required first aid.
- In the event of a serious injury **CircoBats** will at the discretion of the first aid officer, call an ambulance after first attempting to contact the emergency contact for the participant. The cost of the ambulance and any medical treatment required will be born by the participant &/or Guardian.

## EMERGENCY CONTACT PERSON

NAME	RELATIONSHIP:	PH:
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## PRIVACY POLICY

The information on this form is collected for the benefit of the both the participant and the organisation. It will only be released as permitted by you or as required by law.

**I have read and completed this form carefully and the information supplied by me is true and correct to the best of my knowledge.**

PRINT NAME:	DATE:
SIGNED: <span style="float: right;">on behalf of myself or for whom I am guardian.</span>	