

## MORLEY SPORT & RECREATION CENTRE ENROLMENT FORM

### Participant Details:

First Name:	Surname:	D.O.B / /
Address:	Suburb:	Postcode:
Mobile:	Home Ph:	
Email:		
If under 18, Parent/Guardian Name:		
School child attends (if applicable):		

### Activity for Enrolment

Program:	Day:	Time:
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### Background Information

Did you/ your child participate in a program last term?	YES / NO
How did you find out about this particular program? Please tick:	
<input type="checkbox"/> Friend/Family <input type="checkbox"/> Flyer in Newspaper <input type="checkbox"/> Brochure from centre <input type="checkbox"/> School <input type="checkbox"/> Searched Internet <input type="checkbox"/> Centre Website <input type="checkbox"/> Newspaper <input type="checkbox"/> Yellow Pages <input type="checkbox"/> Centre display/poster <input type="checkbox"/> Fun Day/Holiday Clinic	
Do you/ your child suffer from any medical conditions/injuries? YES / NO	
If yes, please specify:	

### Conditions of Enrolment:

1. I acknowledge that YMCA & its staff/volunteers will take all reasonable care of me/my child & I will not hold them responsible for any damage/loss to property and/or accidents.
2. In case of an accident or untoward incident I give my consent for any necessary medical treatment and agree to meet any expense incurred.
3. I realise that I am responsible for informing YMCA staff of any medical conditions that may affect my own or child's participation in the activity. I also agree to notify my instructor before each lesson of any injury/medical condition that will inhibit me / my child to participate in some activities.
4. This enrolment is non-transferrable.
5. This enrolment is only valid for the term of its purchase stated on top of form.
6. I understand that if the class does not receive the minimum required number of enrolments by week 2, the class may be cancelled with any outstanding monies refunded by cheque or used as credit towards another program.
7. Any session not used during the term of purchase will be forfeited and is not transferable into future programs
8. Refunds will only be issued with a medical certificate and will incur a 10% administration fee.
9. Session trials are only available to those who have not previously participated in the program and are valid for one class only. After this time, if you wish to continue with the program, I understand it is my responsibility to notify staff in order to secure a position and make full term payment.
10. I agree to leave and collect my child during the stated class times.

**I have read and accept the above terms and conditions of enrolment.**

Signature: ..... (parent/ guardian if under 18)

Date: / /

**I give Permission for YMCA to Photograph myself or child for promotional purposes: Yes / No**

### Office Only

<b>Enrolment</b>						
Amount:\$	Method: <i>Cash</i>	Chq	Eftpos	Receipt No:	Date:	Staff:
<b>Session Trial</b>						
Date:		Staff:				