Enrolment form

Program information

Program name

Venue

Program date(s)

Participant information

Name

Date of birth / /

☐ Male ☐ Female

Address

Postcode

Phone

Home

Work/mobile

Email address

Please provides details of any medical conditions, allergies or disabilities that may affect your participation in this program

Optional information

To help us serve the community it would be appreciated if you could answer the following questions:

Are you from a culturally diverse background? ☐ Yes ☐ No
(for statistical purposes only)

Are you of Aboriginal or Torres Strait Islander descent? ☐ Yes ☐ No
(for statistical purposes only)

How did you find out about this program?

Payment information

My cheque or money order payable to Sport and Recreation is enclosed OR charge $_____ to my credit card: ☐ Visa ☐ Mastercard

Expiry date /

Cardholder name

Signature

Risk warning and Media consent

Strike out whichever does not apply:

I agree for me/my child/ward to attend the Centre and to undertake all activities and/or to participate in the above program. In the case of an emergency, I authorise the Department of Education and Communities, Sport and Recreation staff, where it is impracticable to communicate with me, to arrange for me/my child/ward to receive such medical or surgical treatment as may be deemed necessary. I also undertake to pay or reimburse costs which may be incurred for medical attention, ambulance transport and drugs while my child/ward is attending the Centre/enrolled in the program.

I understand that although the Department of Education and Communities, Sport and Recreation 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 at the Centre/as part of the program and I accept that risk.

Please tick whichever applies to you:

☐ I consent / ☐ I do not consent to allow the NSW Government to use any photographs, sound and film recordings taken of me/my child/my ward at this program for the promotion of NSW Government services and initiatives to the media and to the general public.

Full name ☐ Self ☐ Parent ☐ Guardian (please tick)

Signature

Date / /

Privacy statement

The Department of Education and Communities of 6 Figtree Drive, Sydney Olympic Park, NSW 2127 will collect and store the information you voluntarily provide to enable processing of enrolments for the program. The information will be provided to relevant staff and be provided to medical professionals where necessary. You consent to these disclosures.

If you have been asked for information regarding Aboriginal and Torres Strait Islander descent and cultural background, this information is voluntary and is being compiled for statistical purposes only.

Any information provided by you will be stored on a database that will only be accessed by authorised personnel and is subject to privacy restrictions. The information will only be used for the purpose for which it was collected. Any information provided by you to the Department of Education and Communities can be accessed by you during standard office hours and updated by writing to us or by contacting us on 13 13 02.

☐ I do not wish to receive promotional information about this service offered by Sport and Recreation.

Refunds and cancellations

Requests for refunds must be made within seven (7) working days prior to the commencement of the program in which you are enrolled. All requests must be made in writing. All refunds are subject to an administration fee of 20 per cent of the total program fee. Refunds will not be given for partial attendance, nor will make up lessons be provided. Refunds will be paid at the completion of the program. Sport and Recreation reserves the right to cancel any program/s. Every effort will be made to give reasonable notice to those who have enrolled when a program is cancelled. Those enrolled will be given a full refund.

Return this form with payment to:
Sport and Recreation
State Government Offices
117 Bull Street, Newcastle West NSW 2302
Fax: (02) 4929 4397

For more information call (02) 4926 1633 or visit www.dsr.nsw.gov.au

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NSW Office of Communities Sport & Recreation