

AUSTRLALIAN UNDER 21 GOLF CROQUET CHAMPIONSHIP

Saturday 24 to Monday 26 September, 2016 Victorian Croquet Centre, Cairnlea, Victoria

CONSENT FORM for PLAYERS under the age of 18

1. PERMISSIONS

Participation		
I (name of parent/guardian)		
of		
	State	P/Code
Phone Email		
agree that (name of player)		
has my consent to compete in the Australian Und Victorian Croquet Centre, Cairnlea, Victoria from		
Photographs		
I agreed that (name of player)		
can be photographed during the tournament which	h may be used for fut	ure publicity by Croquet Australia.
Allergies and Medications		
Please be aware that (name of player)		
is allergic to		
and takes the following medication		
To the best of my knowledge (name of player)		
has no medical condition, disability or injury that i activity.	s likely to place them	at risk participating in this sporting

2. ATTENDANCE				
I will/ will not be accompanying (name of player)to Cairnlea.				
If not please state who is to have guardianship of (name of player)				
and complete the following –				
Name	Relationship if any to the Player			
Address				
	State	_ P/Code		
Phone Email				
I confirm that the information above is correct				
(Signature parent/guardian)	(Date)			

Completed forms to be scanned and emailed to ndu21c@croquet-australia.com.au or posted to NCU21C, c/- 6/7 Fonda Avenue, RUTHERFORD NSW 2320

For more information please contact Jacky McDonald, National Co-ordinator Under 21 Croquet by email ndu21c@croquet-australia.com.au or phone 0409 246 294

