



PRE-SEASON SPARKLES REGISTRATION FORM

PLAYERS INFORMATION

FIRST NAME _____ LAST NAME _____
PREFERRED NAME _____
DATE OF BIRTH _____ TURNING AGE IN 2022 _____
SHIRT SIZE _____

MEDICAL HISTORY

| Does your child suffer any medical conditions: | | | |
|--|----------|----------------|----------|
| Asthma | Yes / No | Cardiac Issues | Yes / No |
| Epilepsy | Yes / No | Other | |
| Wear Glasses | Yes / No | | |

PARENT/GUARDIAN INFORMATION

FULL NAME _____ RELATIONSHIP _____
ADDRESS _____
SUBURB _____ POST CODE _____
NUMBER _____ EMAIL _____
SIGNATURE _____

INFORMATION

Where: United Starz Training Courts, 188 Samsonvale Road, Strathpine QLD 4500

When: 28th January 2022, 4th, 11th, 18th & 25th February 2022

Cost: \$60

Fees can be made via Cash or Direct Deposit

Name United Starz Netball Club

BSB 484-799

Account 154 369 360

Reference Players Name

NB: We will require a completed Medical Authority and Photographic Authority form attached with the registration form.

OFFICE USE ONLY

| Payment received date | Method of payment | Amount received | Receipt No. | Signature |
|-----------------------|-----------------------|-----------------|-------------|-----------|
| / / | Cash / Direct Deposit | \$ | | |



United Starz Netball Club Inc Medical Authority Form

Authority to Administer Paracetamol, Band-aids & Antiseptic Cream

Player Name _____

- I give permission for the Coach, Manager or First Aid Officer only to administer paracetamol, or apply band-aids and/or antiseptic cream to my child, when sudden fever or pain occurs, such as headache or in the instance of an injury:
- I do not give permission for anyone to administer paracetamol to my child.
- I do not give permission for anyone to administer band-aids to my child.
- I do not give permission for anyone to administer antiseptic cream to my child.

PARENT/GUARDIAN INFORMATION

Name: _____ Relationship: _____

Mobile: _____ Home Phone: _____

Email: _____

Signature: _____ Date: _____ / _____ / 20_____



United Starz Netball Club Inc Photographic Permission Form

This authority is an agreement between you and United Starz Netball Club Inc. Please read carefully and sign at the bottom of the page if you agree to allow the publication as to set out below. United Starz Netball Club would like to be able to use you and/or your child's/player's photo in some of its printed and/or electronic promotion and marketing material, which will be available for viewing by the public. If you sign this authority form it means that you agree to the following:

1. You and/or your child's/player's photo may be used for multiple purposes and occasions including publications in print (local newspapers) and electronic media such as United Starz Netball Club website and Facebook page. Although not guaranteed, in most instances, the photos on the website and Facebook page will not be tagged with individual names.
2. You and/or your child's/player's photo may be reproduced in colour or black and white and may be altered for design purposes.
3. United Starz Netball Club are not required to inform you where and when the photo/s are being used
4. Material held will be kept for an indefinite time.

United Starz Netball Club will not use the photographic images for any purpose other than the general promotion and marketing of United Starz Netball Club. Your agreement to permit the use of these photographic images is greatly appreciated. Any inquiries you have, may be directed to the Secretary, United Starz Netball Club. To be able to sign this release form you must be over 18 years of age. If you are not over 18 years of age, we will need the written agreement of your parent or guardian before we can use this material.

I have read this release and I understand what it means. Parent/Guardian to sign if under 18.

PERMISSION GIVEN

Players full Name: _____ Phone: _____

Parent/guardian Name: _____ Phone: _____

Email: _____

Signature: _____ Date: _____/_____/20____

PERMISSION NOT GIVEN

Players full Name: _____ Phone: _____

Parent/guardian Name: _____ Phone: _____

Email: _____

Signature: _____ Date: _____/_____/20____