

## ATHLETICS NELSON REGISTRATION FORM

### SUMMER SEASON 2017/2018 (Term 4 2017 & Term 1 2018)

**This is a parent run club. Parents are expected to help throughout the season**

**One form per family**

Name (first & last name)	Date of birth	Male/female	Age at 31/12/2017
1			
2			
3			

PARENT/CAREGIVER NAME(s): .....

ADDRESS.....

PHONE..... MOBILE: .....

EMAIL ADDRESS: .....

MEDICAL CONDITION: .....

EMERGENCY CONTACT (if not parent/caregiver above).....

- I agree that a parent/care-giver will be present at all athletics sessions  
 I allow my child/children's results to be on the Athletics Nelson website.

Registration Term 4 2017 & Term 1 2018	<b>each child *</b>	<b>\$80</b>	
Club nights 7-14yr olds			
		<b>Total:</b>	

\*Includes national & regional levies

**PAYMENT:**

- Cheque: Payable to: Athletics Nelson  
 Cash  
 Internet banking to Account # 123165 0198477 00  
 (State family name and the words "children's sub")

Please indicate any area you would prefer to parent help in/have an interest in:  
**Discus, Shot Put, Long Jump, High Jump, Track timing,  
 Track starting, Sprints, Managing a group** (Please circle/ indicate)

\*Please note some of these parent help areas above are very easy\*