ATHLETICS NELSON REGISTRATION FORM

SUMMER SEASON 2016/2017 (Term 4 2016 & Term 1 2017)

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

One form per family					
	Date of		Age at		
Name (first & last name)	birth	Male/female	31/12/2016		
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 2016 & Term 1 2017	each child *	\$80	
Club nights 7-15yr olds	or 3 + children *	\$200	
		Total:	

*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