



Swimmer's Surname

[Empty box for Swimmer's Surname]

Aquatic Centre Registration Form

SWIMMER DETAILS	
Name:	
Date of Birth:	
Address:	
Suburb:	P/code:
Phone:	
Mobile:	
Email:	
St Hilda's student <input type="checkbox"/> YES <input type="checkbox"/> NO	
PARENT/GUARDIAN DETAILS	
Mothers Name:	
Phone (H):	
Phone (B):	
Phone (M):	
Email:	
Fathers Name:	
Phone (H):	
Phone (B):	
Phone (M):	
Email:	
EMERGENCY CONTACT DETAILS	
Name:	
Relationship:	
Mobile:	

MEDICAL INFORMATION

If your child is a student of St Hilda's School, medical information will be obtained from your daughter's student file. Non St Hilda's School students are asked to complete a Medical Information Form and submit with your registration.

INDEMNITY

I _____ (*name*)
 (Swimmer if over 18 yrs/Parent/Guardian)
 for myself/my child acknowledge and agree that the Corporation of the Synod of the Diocese of Brisbane, its employees, agents, officers and contractors will not be liable for any loss or damage to any persons or properties arising from any acts or omissions by the Corporation of the Synod of the Diocese of Brisbane, its employees, agents, officers and contractors or any participant in the Aquatic Centre arising under the law of contract tort or otherwise, and indemnify the said Corporation in relation to any such loss and damage.

I give my consent for him/her to participate in swimming squad or lessons and agree to delegate my authority to the staff and instructors involved. To ensure the safety, well being and successful conduct of the students as a group, or individual in the above mentioned activities staff may seek to discipline students (which may include removal from the pool) should inappropriate conduct occur. I also authorise the coaches and instructors to obtain medical assistance if required and I agree to pay all medical expenses incurred on behalf of the above swimmer. I further authorise qualified practitioners to administer anaesthetic if such an eventuality arises. I submit the attached medical information about the above swimmer which includes limitations which he/she has for the activity concerned.

ST HILDA'S SWIM CLUB

The St Hilda's Aquatic Centre has the St Hilda's Swimming Club, which is affiliated with the Queensland Swimming Association (QSA). It is an expectation of those squad members who wish to compete in meets run by this association to compete as a member of the St Hilda's Swimming Club only.

SIGNATURE:.....

DATE:.....

(Parent/Guardian signature is required if the swimmer is under the age of 18 years).