



Bunbury Primary 'Runners Club' Participation and Consent form

CHILD 1

FIRST NAME: _____ LAST NAME: _____

DATE OF BIRTH: _____ YEAR & ROOM NUMBER: _____

MEDICAL DETAILS: _____ MEDICATION: _____

CHILD 2

FIRST NAME: _____ LAST NAME: _____

DATE OF BIRTH: _____ YEAR & ROOM NUMBER: _____

MEDICAL DETAILS: _____ MEDICATION: _____

CHILD 3

FIRST NAME: _____ LAST NAME: _____

DATE OF BIRTH: _____ YEAR & ROOM NUMBER: _____

MEDICAL DETAILS: _____ MEDICATION: _____

PARENT/GUARDIAN DETAILS

PARENT NAME: _____ CONTACT NUMBER: _____

EMERGENCY CONTACT: _____

I Parent/guardian give permission for _____ to attend the before school running program run by designated coach.

I understand that my child is not permitted to leave the designated area during the session. Please ensure you child is aware of this rule.

- 1) As a parent or guardian of the child/children named above, I give permission for my children to participate in the Running program, to be conducted by designated coach.
- 2) I agree to release the designated coach from any liability to my child/children or myself in relation to any injury or illness that my child/children may suffer, and for loss or damage to property, in connection with the activities except to the extent that liability arises as a result of the negligence of designated coach.
- 3) I give permission to the supervisors of the activities appointed by designated coach to implement code of conduct and/or take other reasonable measures to ensure the successful conduct of activities and safety and wellbeing of the activity participants.
- 4) In the event of injury or illness, I parent/guardian authorise supervisors to apply or arrange first aid and arrange examination by a registered medical practitioner and, if contact with me is impracticable or impossible, to arrange whatever medical treatment the registered medical practitioner considers necessary at that time. I will pay all medical expenses incurred on behalf of my child/children.
- 5) I have provided all information necessary for the supervisors to plan safe participation by my child/children in the activities.

Signed: _____ Date: _____

Name: _____