



# BLACKTOWN CITY PHYSICAL CULTURE CLUB

Affiliated with the Edith Parsons School of Physical Culture

## 2019 REGISTRATION FORM

SURNAME	FIRST NAME	DATE OF BIRTH	GROUP*

\* Age group is determined by age at **1<sup>st</sup> September 2019**

ADDRESS:

PHONE:

EMAIL:

As a member of Blacktown City Physical Culture, and by signing below, I agree to the following:

- To attend all classes, be punctual and wear appropriate clothing (leotard or gym wear). If sick, or unable to attend, I will endeavour to advise the Instructress, either by phone or text.
- To represent the Club at Interclub Competition, Champion Girl and/or a Team\* event (\*if selected)
- To purchase a Club leotard/skirt and soft sole silver ballet shoes (in Term 3 or earlier) to be worn at scheduled events.
- To be available for additional team lessons on Thursday's if required as scheduled by the Instructress.
- To allow photographs to be taken during class and/or at events which may be used in advertising, publicity and/or the Clubs' website.
- To pay fees on time so that the Club can meet its financial obligations. Cheques made out to "Blacktown City Physical Culture". Direct debit is an option. I understand class fees must be paid when absent.
- I understand that public liability insurance is covered in the registration fee but personal injury is not. I agree to hold harmless Blacktown City Physical Culture against any medical, hospital or ambulance expenses incurred in the treatment of my child relating to personal injury sustained at class or competition.

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**If under 18: Parents Name**

\_\_\_\_\_  
**Signed**

\_\_\_\_\_  
**Date**

Office use - Payments		