



A11
About

INTEGRITY

HONESTY

RELIABILITY

DEDICATION

PO Box 204
Kedron 4031

Ph: 0412 402 980
ABN: 63 064 246 958

ENROLMENT FORM

2016-2017

Pool Venue: ☐ Everton Park State School ☐ Woolloowin State School ☐ Geebung State School

Parent/Guardian Details

First Name: _____ Last Name: _____

Postal Address: _____

Suburb: _____ Postcode: _____

Phone: (h) _____ (mob) _____

Email: _____

Preferred Contact ☐ phone ☐ SMS ☐ email ☐ post

Swimmer 1 Details

First Name: _____ Last Name: _____

Date of Birth: ____/____/____ Gender: ☐ Male ☐ Female Preferred Contact ☐ email ☐ post

Medical Consideration: _____

Swimmer 2 Details

First Name: _____ Last Name: _____

Date of Birth: ____/____/____ Gender: ☐ Male ☐ Female Preferred Contact ☐ email ☐ post

Medical Consideration: _____

Swimmer 3 Details

First Name: _____ Last Name: _____

Date of Birth: ____/____/____ Gender: ☐ Male ☐ Female Preferred Contact ☐ email ☐ post

Medical Consideration: _____

Swimmer 4 Details

First Name: _____ Last Name: _____

Date of Birth: ____/____/____ Gender: ☐ Male ☐ Female Preferred Contact ☐ email ☐ post

Medical Consideration: _____

Terms and Conditions

1. **"All About Aquatics"** for the purposes of this application and declaration means and includes All About Aquatics (Int) Pty Ltd as trustee for Graham Family Trust, its members and where the context so permits, their respective directors, officers, members or agents.
2. **If accepted** I will be permitted to participate in the All About Aquatics program subject to my complying with the terms and conditions of the All About Aquatics Program, this declaration, the All About Aquatics Administrative Procedures (to the extent relevant) and any reasonable direction issued by the All About Aquatics program organizers, or their representatives. A copy of the relevant All About Aquatics Administrative Procedures is available on request from All About Aquatics.
3. **This document cannot be amended.** If I do amend it my application will be null and void. It cannot be accepted by All About Aquatics.
4. **Insurance** is in place that provides limited cover to me whilst I am participating in the All About Aquatics program. (For insurance details contact All About Aquatics Office.) I understand that this insurance may not cover me for all injury, loss or damage sustained by me and I can, in my own interests, seek and obtain personal insurances over and above the cover provided by All About Aquatics.
5. **This declaration** comprises a contract between me and All About Aquatics. It is necessary and reasonable for promoting and conducting the All About Aquatics Program.
6. **Warning:** Participation in the All About Aquatics program can be inherently dangerous. Serious accidents may happen which may result in me being injured. I have voluntarily read and understood this warning and accept and assume the inherent risks in the All About Aquatics program.
7. **Exclusion of Liability:** Except where provided or required by law and such cannot be excluded. I agree that it is a term of my entry in the All About Aquatics program (if accepted) that All About Aquatics is absolved from all liability however arising from injury or damage however caused (whether fatal or otherwise) arising out of my participation in the All About Aquatics program. I acknowledge that the services and benefits I receive in relation to the All About Aquatics program are "recreational services" as defined under the Trade Practices Act 1974. Where I am a consumer, as defined by any relevant law, certain terms and rights may be implied into a contract for the supply of goods or services for my benefit. I acknowledge that these terms and restricted or modified by these All About Aquatics programs terms and conditions.
8. **Release and indemnity:** In consideration of All About Aquatics accepting my application for entry to the All About Aquatics program I:
 - a. release and forever discharge All About Aquatics from all Claims that I may have or may have had but for this release arising from or in consideration with my participation in the All About Aquatics program; and
 - b. indemnify and hold harmless All About Aquatics to the extent permitted by law in respect of any Claim by any person including but not only another participant in the All About Aquatics program arising as a result of or in connection with my participation in the All About Aquatics program.
9. In this clause 8 **"Claims"** means and includes any action, suit, proceeding, claim, demand, damage, penalty, cost or expense however arising but does not include a claim in respect of any action, suit, etc made by any person entitled to make a claim under a relevant All About Aquatics insurance policy.
10. **Fitness to Participate:** I declare that I am and must continue to be medically and physically fit and able to participate in the All About Aquatics program. I have provided details overleaf of any medical conditions that may be affected by participation in All About Aquatics programs or services. I am not and must not be a danger to myself or to the health and safety of others. I will immediately notify All About Aquatics in writing of any change to my fitness and ability to participate. I understand and accept that All About Aquatics will continue to rely upon the declaration as evidence of my fitness and ability to participate.
11. **Medical Treatment:** I consent to receiving any medical treatment that the All About Aquatics program organizers or their authorized representatives consider necessary or desirable during or after the All About Aquatics program. I also agree to reimburse All About Aquatics for any costs or expenses incurred in providing me with medical treatment.
12. **Privacy:** I understand that the information I have provided overleaf is necessary for the conduct of the All About Aquatics program and for the objects of All About Aquatics. I acknowledge and agree that the information will only be used by All About Aquatics to facilitate the conduct of the All About Aquatics program and other programs conducted by All About Aquatics and/or to provide me with promotional material from All About Aquatics sponsors and third parties. If the information is not provided my application may be rejected. I acknowledge that if I do not wish to receive promotional material from All About Aquatics sponsors and third parties I must advise All About Aquatics in writing.
13. **Copyright in photographs and right to use:** I acknowledge and consent to photographs being taken of me during my participation in the All About Aquatics program. I acknowledge that the photographs are owned by All About Aquatics and that All About Aquatics may use the photographs for promotional or other purposes without my further consent being obtained. Further, I consent to the All About Aquatics program organizers using my name, image, likeness and also my performance in the All About Aquatics program, at any time, to promote the All About Aquatics program by any form of media.

Application and Declaration

I have read, understood, acknowledge and agree to the declaration above including the warning, exclusion of liability, release and indemnity. I agree to adhere to the rules and direction from All About Aquatics Staff and agree to behave at all times with consideration for other guests and their safety.

Name: _____ Signature: _____ Date: _____

Where the applicant is under 18 years of age this form must also be signed by the applicant's parent/guardian.

Name: _____ Signature: _____ Date: _____