

MEMBERSHIP FORM

Horsley's Outdoor Krew activities are FREE with open access for children aged 9-12 years **only**. This means that children are free to participate when they want, however, Horsley's Outdoor Krew does **not** provide a childcare service.

To ensure that all children participating are safe and that parents/carers are kept up to date with information about program activities, we need every participant to complete a membership form providing us with basic information, contact details and permission

Child/ren's name/s _____

Parent/Carer contact

Name _____ Email _____

Phone _____ Mobile _____

Emergency contact

Name _____ Phone _____

Important information (e.g medical conditions, allergies etc)

Background: Are you of Aboriginal or Torres Strait Islander origin?

Yes - Aboriginal Yes – Torres Strait Islander No Prefer not to say

Arrangements for arriving (eg walking, car, bus, walking school bus etc)

Arrangements for leaving (eg walking, car, bus etc)

Interests/ Hobbies

How did you find out about us? _____

Name _____ Signature _____ Date _____

****PLEASE TURN OVER TO COMPLETE MEDIA CONSENT FORM****

For further information contact DANIEL or MADDISON 4283 8111.
www.facebook.com/healthycitiesillawarra/ www.healthyillawarra.org.au

Healthy Cities Illawarra Inc

MEDIA CONSENT FORM: ADULTS & CHILDREN

I _____ (full name), give permission to Healthy Cities Illawarra Inc (HCI) to use:

- My image/photograph/video (including voice) Yes
- Image/photograph/video (including voice) of my child/ren Yes

(full name of child/ren _____
_____)

in materials (including television advertising) produced by HCI for the promotion of Healthy Cities Illawarra Inc and its activities.

I understand that these promotions/ videos will (including television advertising) will also be placed on websites and social e-media pages managed by Healthy Cities Illawarra Inc for public relations and promotional purposes for a period of up to 3 years

I understand that:

- The promotion **may** appear on the Internet/World Wide Web (www);
- The promotion **may** appear in print, electronic, or video media;
- The promotion **may enable readers/viewers to identify me/ my child/ren.**

SIGNATURE _____ **DATE** _____

My contact details are: (The following details **will not** be published:)

Name of person/ parent or guardian (where applicable):

Position (where applicable): _____

Organisation (where applicable): _____

Address: _____

Phone: _____ E-Mail _____

IMPORTANT – PLEASE NOTE

**Your image & voice will only be used to promote Healthy Cities Illawarra Inc
(a not for profit registered charity).**

Office Use Only

File number: Photo/image ID number:.....