



**UTS-Ryde Water Polo Club Inc.**  
**Junior Development Program**

**Registration Form**

12<sup>th</sup> July, 2007 to 7<sup>th</sup> December, 2007

***Player's Details***

Name:		
Date of birth:	Age:	Gender: Male / Female
Address:		
Suburb:		
Postcode:		
Players: Mobile:	Home:	
Email:		

***Parent/Guardian Details***

Name:		
Address:		
Suburb:		
Postcode:		
Mobile:	Home:	
Email:		

***Emergency Contact*** (In case of an emergency and it is not possible to contact the above parent/guardian please provide the details of an other person would be able to be contacted)

Name:		
Relationship to player:		
Address:		
Suburb:		
Postcode:		
Phone:		

Does your child have any special needs (medical etc) that UTS-Ryde Water Polo should be aware of? Yes / No IF YES PLEASE SPECIFY:

Has your child played water polo before? Yes / No: IF YES PLEASE SPECIFY (this will help our coaches develop an appropriate program for your child):

How did you hear about the UTS-Ryde Water Polo Junior Development Program?

0 School Newsletter: \_\_\_\_\_ 0 Flyer: \_\_\_\_\_

0 School Teacher: \_\_\_\_\_ 0 Newspaper: \_\_\_\_\_

0 Other: \_\_\_\_\_

### ***Player's Declaration***

I \_\_\_\_\_ (print name) declare that the above information is true and I agree to be bound by the constitution and by laws of the UTS - Ryde Water Polo Club Inc.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### ***Parent/Guardian (If U/18)***

I \_\_\_\_\_ (print name) give permission for my child to par take in the UTS-Ryde Water Polo Development Program.

I declare that the above information is true and I agree to be bound by the constitution and by laws of the UTS - Ryde Water Polo Club Inc.

*I understand information gathered by the UTS-Ryde Water Polo Club Inc. via this registration form, will be used to provide information required by NSW Water Polo Inc. and Australian Water Polo Inc. in their registration process and for the information of club officials carrying out their club related duties. **All information is treated confidentially.***

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### ***COMMITTEE USE ONLY***

POLO REG. NO: \_\_\_\_\_ GRADE: \_\_\_\_\_

FEES PAID: \$ \_\_\_\_\_

RECEIPT NO: \_\_\_\_\_

REG. WITH NSWWPI: Yes /No