



PARENT / GUARDIAN PARTICIPATION FORM

Coledale Surf Life Saving Club

I, (name) _____

PLEASE PRINT CLEARLY

Contact Phone Number H _____ W _____

Mobile _____

Email _____

Name of Child/Children and Ages

Photo release authorisation. I hereby give/do not give approval for all photographs of my child or I to be reproduced and used by Coledale Surf Club in publications and publicity material including digital media, newsletters and newspapers.

I currently hold a current Bronze Medallion _____ Yes / No

I would like to do my Bronze Medallion Training _____ Yes / No

I would like to do my First Aid Training _____ Yes / No

I would like to help as an Age Manager or assistant _____ Yes / No

I understand that I have an obligation to participate as a parent / guardian in beach activities and / or BBQ.

Signed: _____

Date: _____