

The Entrance Bateau Bay United Soccer Club Inc.

PARENT AGREEMENT FORM



Dear Parents/Carer

Please read and sign this Agreement before your child/children register with The Entrance Bateau Bay United

Peter Tierney
Club President.

As a condition of registration, I agree to:

1. Abide by the rules of The Entrance Bateau Bay United Soccer Club Inc (TEBBUSC)
2. Abide by TEBBUSC's Code of Conduct (see Parent's and Player's Info)
3. Abide by the decisions of the Grading Committee.
4. Ensure that my child/ren are wearing the correct club uniform,. I understand that the Club playing shirts must be handed to the Coach/Manager at the completion of each game. **Shin pads must be worn at all training sessions and for all games.**
5. Attend canteen, BBQ, net and match-day table roster when rostered.
7. Notify the Coach/Manager personally and with reasonable notice, if my child/ren are unable to attend training and/or games.
8. Supervise my child/ren on match days and at training. I understand the importance of this condition, particularly when the weather is inclement and matches/training may be cancelled at short notice, or when my child/ren misbehave at either training or match days
9. Accept the right of the Coach, Manager, or other interested persons to bring to the notice of the Management Committee any misbehaviour by my child/ren at training or on match days. Any such misbehaviour may be referred to the Internal Judiciary for assessment, hearing and decision.
10. Abide by any decisions made by the Club's Internal Judiciary and/or Management Committee.
11. Not treat the Club, the Committee, Coaches, Managers, other Officials and other parents as a child minding service. It is the Parents responsibility to supervise their children at all times – before and after training and match days.

I acknowledge that I have read and understood the above conditions and agree to abide by those conditions.

Name of Parent/Carer.....

Signature of Parent/Carer..... Date.....

Family Name.....

Child/ren's Name & Date of Birth

1.....DOB..... 2.....DOB.....

3.....DOB..... 4.....DOB.....

Family Address.....

Home Phone No.....

E-mail Address.....

Mother's Name..... Emergency Contact No..... Mobile No.....

Father's Name..... Emergency Contact No..... Mobile No.....

U/5 to U/8 Non grade teams - children **MAY** be placed in teams with friends **IF POSSIBLE**. Please list names of players your child may wish to play with

ARE YOU PREPARED TO COACH OR MANAGE YOUR CHILD'S TEAM? YES / NO

Signature.....

MAIL OUTS

From time to time, TEBBUSC may wish to take part in mail-out campaigns which will provide either a financial or sporting advantage to our organisation. Some people, for privacy reasons, object to this type of use of their contact details. Please note that in any such campaign, only contact details (ie. name and address) of parents and players over 18 years of age will be used -your telephone number and the names of junior players **WILL NOT** be used. Please indicate below your feelings on this issue:

1. I HAVE NO OBJECTION to my contact details (name and address only) to be used for such mail-outs.
OR

2. I do not wish for my contact details (name and address) to be used for such mail-outs.

Name..... Signature.....

Date.....

CLUB USE ONLY

Registrar's Signature / Secretary's Signature.....

Date.....