



FLAMIN' DRAGONS PORT MACQUARIE
INC.

MEMBERSHIP APPLICATION 2020 - 2021**

New / Renewal (Please circle)

Title _____ First Name _____ Surname _____

Address: _____

Email address: _____

Phone: _____ Mobile Phone: _____

Do you have any Pre-Existing Medical Conditions that may affect your paddling activities (information provided only to coaches) eg: asthma, diabetes, heart condition Yes / No Please state conditions: _____

Do you wish to identify as a Breast Cancer Survivor? Yes / No

I give my permission for my contact details to be published for Club purposes Yes / No

I give permission for my photo to be used for Club purposes only

I have read and agree to abide by the Club's Code of Conduct and Club Regulations. (Both available on the Forms page of our website.)

In what area would you like to assist the Club?

<input type="checkbox"/> Regatta Organisation	<input type="checkbox"/> Sweep / Coach	<input type="checkbox"/> Club Organisation
<input type="checkbox"/> Social Committee	<input type="checkbox"/> Maintenance including boats and trailers	<input type="checkbox"/> Fund Raising

CONDITIONS OF MEMBERSHIP & WAIVER INDEMNITY

(Please read the following before signing)

As a member of Flamin' Dragons Port Macquarie, I agree to be bound by the rules of the Club as stated in the Club Constitution and Regulations and the terms of my DBNSW Application form.

I have read and accept these conditions and wish to apply for membership to FDPMP for the 2020/21 season.

Signed _____ Date _____

Print your Full name _____

Junior Consent (Under 18):

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

I, am the parent or guardian of the applicant. I authorise and consent to the applicant undertaking the Sporting Activities. In consideration of the applicant's participation being accepted by FDPMP & DBNSW, I expressly agree to be responsible for the applicant's behaviour and agree to accept in my capacity as parent or guardian, the terms set out in this participant declaration, including the provision by me of a release and indemnity in the terms set out above. In addition, I agree to be bound by and to comply with DBNSW's constitution and any regulations and policies made under it.

Parent/Guardian's signature:(where applicant under 18 years old)

Date:

Parent /Guardian name: