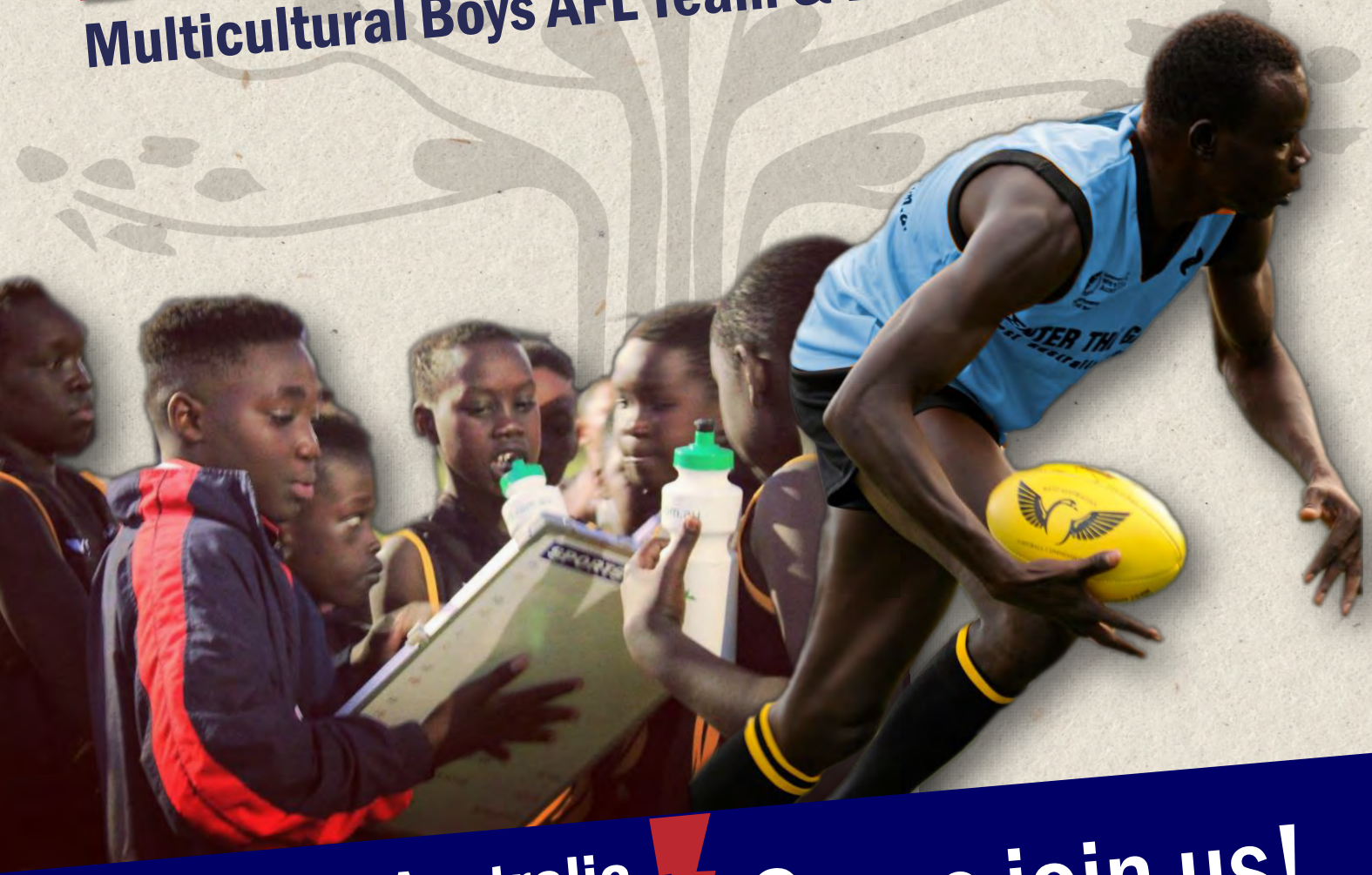
Butler Falcons

Multicultural Boys AFL Team & Leadership Program



We came to Australia
To electrify AFL

Come join us!

Who: Boys aged 8 – 18 years old
FREE TO JOIN!

Where: Butler Community Centre, Corner of Kingsbridge Blvd and Connolly Dr, Butler

When: Leadership Program: 5 – 6:30 pm
AFL Training: 7 – 9 pm

For more information, call the Edmund Rice Centre on **9349 9660**
or email Joe at **joe@ercwa.org.au**

REACHING OUT, CHANGING LIVES
Edmund Rice CENTRE WA
www.ercwa.org.au

Butler Falcons @ButlerFalcons @ButlerFalcons

AFL FAIRGAME donate SPORT FREMANTLE DOCKERS FOUNDATION AUSTRALIA ECU EDITH COWAN UNIVERSITY City of Wanneroo healthway Go for 2&5 FRUIT & VEG

Edmund Rice Centre Youth Programs

Young Person's Details

Full name:		Male / Female
Street Name & No:	Suburb	Postcode
Dietary requirements:		
Allergies:		
Ailments/Injuries:		
Date of birth:	Culture:	
Country of birth:	When did you arrive in Australia?	
Language spoken:	School:	
Medical condition/disability		
Are you on medication?	Yes/No	
If yes, name of medication:	Dosage: times to be taken	
Medicare card number:		
Do you have ambulance cover?	Yes/No	
Home contact person's name:		
Home phone number:	Mobile phone:	
Emergency contact's name:	Mobile phone:	
Anything else we should know?		

PARENTAL /GUARDIAN CONSENT

I _____ give permission for _____ (name) to participate in the Edmund Rice Centre WA youth programs. I understand that the programs will be mainly of an arts (e.g. media, performances), sports (e.g. training/games in various sports) or leadership (e.g. coaching) nature, and may include excursions and camps. I also understand that my child may be photographed or filmed while conducting activities on the youth programs and I give permission for these photographs and films to be used for informational material about the program and for the promotion of positive youth involvement in our community. I also understand and accept that my child may be transported in personal vehicles and that at any time I can request that this not take place. I will then be responsible for transporting/collecting my child if a bus is not available.

I release the Edmund Rice Centre WA and partners from liability for any accident, illness or injury my child may sustain whilst involved in these activities. I understand that every effort will be made by the coordinator and other staff to contact me first and then the "emergency contact" named on the application form in the event of any illness or accident relating to my child. I hereby authorise that in the case of an emergency, the coordinator has my consent for my child to receive medical or surgical treatment if I am not able to be contacted. I confirm that the particulars on the application form and medical report are correct.

Parent/Guardian's full name:

Signature: Date:

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