Orienteering South Australia Inc.

INTRODUCTION TO ORIENTEERING MODERATE COURSES DAYS 27 MAY & 3 JUNE2018 PERMISSION FORM

Name:		
Date of Birth:	Gender	
School:		
Number of Orienteering events attended to date:		
Orienteering Club (if applicable)		
Contact Details		
Name of Parent (s):		
Home Phone:		
Mobile:		
Address:		
Post Code:		
Email:		

Medical Information Medicare Number: Medication: Allergies: Medication: Additional Medical Details/Conditions: Name of Private Health Fund (if applicable): Date of Last Tetanus Injection: Private Health Fund Membership Number:

I give permission for my child to participate in the Introduction to Orienteering Days to be conducted at Wadmore Park and in the Kuitpo Forest on 27 May and 3 June 2018 respectively.

I give permission for my child to be photographed during these activities and for these photographs to appear in Orienteering SA publications and on the Orienteering SA website (please circle) Yes / No

Signed: _____ (Parent/Guardian) Date:

/ 5 / 2018

Please hand in to the Registration on 27 May 2018..

How did you find out about today?

Please help us improve our advertising of our Introduction to Orienteering Days by indicating below how you became aware of today (please tick \Box)

Orienteering SAWebsiteProgramEnewsOrienteering ClubFriendsSchoolVolter (Please specify)