

# Football refereeing course

## Enrolment information 0028758

Name	<input type="text"/>	Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="checkbox"/> Male <input type="checkbox"/> Female
Address	<input type="text"/>	Phone	<input type="text"/>	
	<input type="text"/>	Home	<input type="text"/>	
	Postcode	Work/mobile	<input type="text"/>	
Email	<input type="text"/>	Which football club do you belong to?	<input type="text"/>	
Do you have any medical conditions, allergies or disabilities that may affect your participation in this program? Please give details.				
<input type="text"/>				

Were you born in Australia? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, what year did you arrive in Australia?	What language/s do you speak
	<input type="text"/>	<input type="text"/>

## Optional information

To help us serve the community it would be appreciated if you could answer the following questions:

Are you from a culturally diverse background? (for statistical purposes only)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Where did you find out about this program? (Please tick one only)
Are you of Aboriginal or Torres Strait Islander descent? (for statistical purposes only)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Newspaper <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Brochure <input type="checkbox"/> Friend
		<input type="checkbox"/> School <input type="checkbox"/> Been before <input type="checkbox"/> Flyer in mail <input type="checkbox"/> Poster <input type="checkbox"/> Website

## Payment information

My cheque or money order payable to 'NSW Sport and Recreation' is enclosed OR charge \$  to my credit card  Visa  Mastercard

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Expiry date	<input type="text"/> / <input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	-------------	---

Cardholder name	Signature
<input type="text"/>	<input type="text"/>

## Media consent

Strike out whichever does not apply:

I agree to allow NSW Sport and Recreation to use my/my child's/my ward's name and any photographs, sound and film recordings taken of me/my child/my ward at this program for the promotion of the department's services and initiatives to the media and to the general public.

Full name  Self  Parent  Guardian (please tick)

Signature

Date

 /  / 

### Privacy statement

The NSW Department of the Arts, Sport and Recreation of 6, Figtree Drive, Sydney Olympic Park, NSW 2127 will collect and store the information you provide to enable processing of enrolments for the Football refereeing course. The information will be provided to instructors of the program and their supervisors, where necessary, and you consent to this disclosure. If you have been asked for information regarding Aboriginal and Torres Strait Islander descent and cultural background, this information is voluntary and is being compiled for statistical purposes only. Any information provided by you will be stored on a database that will only be accessed by authorised personnel and is subject to privacy restrictions. The information will only be used for the purpose for which it was collected. Any information provided by you to the department can be accessed by you during standard office hours and updated by writing to us or by contacting us on 13 13 02.

## Risk waiver

Strike out whichever does not apply:

I wish to attend/I agree to my child's/ward's attendance at the program noted above. In the case of an emergency, I authorise the program staff, where it is impracticable to communicate with me, to arrange for me/ my child/ ward to receive such medical or surgical treatment as may be deemed necessary. I also undertake to pay or reimburse costs which may be incurred for medical attention, ambulance transport and drugs while I am/ my child/ ward is enrolled with the program. I understand that although DASR and its service providers attempt to minimise any risk of personal injury within practical boundaries, accidents do happen and all physical activities carry the risk of personal injury. I acknowledge that there is an inherent risk of personal injury in physical activities that will be undertaken.

Full name  Self  Parent  Guardian (please tick)

Signature

Date

 /  / 

### Refunds and cancellations

Requests for refunds must be made within seven (7) working days prior to the commencement of the program in which you are enrolled. All requests must be made in writing. All refunds are subject to an administration fee of 20 per cent of the total program fee. Refunds will not be given for partial attendance, nor will make up lessons be provided. Refunds will be paid at the completion of the program. NSW Sport and Recreation reserves the right to cancel any program/s. Every effort will be made to give reasonable notice to those who have enrolled when a program is cancelled. Those enrolled will be given a full refund.

## How to enrol

**By phone** Call (02) 9006 3860 and have your credit card details ready (Visa, Mastercard, Bankcard). For deaf, hearing and speech impaired people only, TTY (02) 9006 3701.

**By fax** Complete the enrolment form, include your credit card details and fax to (02) 9006 3888.

**By mail** Complete the enrolment form, include either your credit card details, a cheque or a money order, and mail to: NSW Sport and Recreation, Locked Bag 1422, Silverwater NSW 2128.

For more information call

**(02) 9006 3860**

www.dsr.nsw.gov.au

