

2021 RECREATION ENROLMENT FORM – CHILD



***PLEASE USE CAPITAL LETTERS**

Parent/Carer's name:		
Child's Given name:		
Child's Family name (Surname):		
Home phone:	Mobile:	
Email:		
Child's Date of Birth: <small>d d / m m / y y y y</small>		<input type="checkbox"/> Please tick if you would not like to receive CCC update information
Emergency contact details – of parent / guardian NOT attending		
Name:	Phone:	Relationship:
Class attending:		

Do you consider the child or yourself to have a disability, impairment or long-term condition? YES No Who has the condition? Child / parent/guardian

If yes, please indicate **who**, and the areas of disability, impairment or long-term condition

<input type="checkbox"/> Acquired brain injury	<input type="checkbox"/> Hearing/deaf	<input type="checkbox"/> Learning	<input type="checkbox"/> Medical condition
<input type="checkbox"/> Intellectual	<input type="checkbox"/> Physical	<input type="checkbox"/> Other Disability	

Anaphylaxis: Has your child been diagnosed at risk of anaphylaxis? ☆ Yes ☆ No
 Does your child have an auto injection device (e.g. EpiPen) ☆ Yes ☆ No

Other: Does your child have any other medical conditions? (e.g. asthma, diabetes etc)
 Yes (please submit details below) No

Please turn form over to complete other side

How did you hear about the course? (Please tick)

<input type="checkbox"/> Word of Mouth	<input type="checkbox"/> Friend	<input type="checkbox"/> Brochure in letterbox	<input type="checkbox"/> Website	<input type="checkbox"/> Facebook
<input type="checkbox"/> Ad in local paper	<input type="checkbox"/> Existing or past participant	<input type="checkbox"/> Job Network	<input type="checkbox"/> Other	

CANCELLATION AND REFUND POLICY

If withdrawal from a course is made at least 7 days prior to the commencement, CCC will refund to the payee any course fees paid, less an administration charge of \$20. Withdrawals with fewer than 7 days' notice are not entitled to a refund. In the event that the course has to be cancelled by CCC, a full refund will be paid.

PRIVACY STATEMENT

Cheltenham Community Centre (CCC) offers a range of education and community programs.

When you enrol with us, we ask for details about yourself, which will be used as our point of contact. This information is **only** used for funding and planning purposes.

You are also required to provide us with an emergency contact. Please ensure that this person is aware that their contact details have been given to us and that you have their consent to provide this information.

If you have any concerns about providing the information requested, please speak to our Customer Service staff they will be able to assist you. Please be assured that any information provided to us is kept confidential and any concerns you may raise about the way we handle your information will also be kept confidential.

If you would like access to the records we hold about you or you would like to correct or update any information, please speak to reception staff who would be pleased to discuss this with you.

All information is held and handled in accordance with the relevant Legislation.

PHOTOGRAPH & VIDEO AUTHORITY

I give permission to CCC to use my photograph &/or video footage for the use of CCC activities, for example Annual General Meeting presentation or advertising (including CCC Facebook page).

Yes No

MEDICAL AUTHORITY

I authorise you in the event of injury, illness or accident to obtain medical assistance as required and to be at my expense. Yes No

DECLARATION

I have read the above information and understand the purposes for the collection of my personal information and information.

Signature

Date / /