

NEW MEMBER APPLICATION UNDER 18

1. APPLICANT DETAILS

Full Name	<input type="text"/>		
Street Address	<input type="text"/>		
Suburb	<input type="text"/>	Postcode	<input type="text"/>
		State	<input type="text"/>
Contact Number	<input type="text"/>	Email	<input type="text"/>
Date of Birth	<input type="text" value=" / /"/>		

2. EMERGENCY CONTACT

Name	<input type="text"/>	Contact Number	<input type="text"/>
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3. MEDICAL CONDITIONS, ALLERGIES ETC

If not applicable, please write "Not Applicable"

4. APPLICATION TERMS

I understand that Karate is a system of fighting that involves strenuous physical exercise and physical contact with other persons and property, and there is a significant risk that serious injury, illness from infectious diseases (e.g. COVID-19), disability, death or property damage may result from participation.

In full knowledge of the risks and hazards, I consent to the Applicant participating in Karate at their own risk, apply for the Applicant's membership of the Adelaide University Karate Club Inc ABN 81 721 753 664 (**Club**) and agree as follows:

1. I acknowledge that all information provided on this form is subject to the Club's Privacy Policy, which can be viewed at www.aukc.com.au/membersresources.htm;
2. I will ensure that the Applicant becomes and remains a member of the Adelaide University Sports Association Inc (**AUSA**) and I authorise (without obliging) the Club to sign all documents and do all things necessary on the Applicant's behalf to apply for and maintain membership of AUSA;
3. I will comply, and I will ensure that the Applicant complies, at all times with the constitution and policies of the Club and the Adelaide University Sports Association Inc (**AUSA**), which are available at www.aukc.com.au/membersresources.htm and www.theblacks.com.au respectively;
4. To the maximum extent permitted by law, I accept all risk of loss, liability, damage, injury, illness or death to any person or property, which may be suffered or caused in connection with the Applicant's membership of the Club or AUSA or the Applicant's participation in Karate, however it may arise (including by negligence of the Club, AUSA or their officers, members, instructors, volunteers, servants or agents), and I release and indemnify the Club, AUSA and their officers, members, instructors, volunteers, servants and agents in relation to any such loss, liability, damage, injury, illness or death; and
5. I declare that the Applicant is not the subject of any allegation, arrest, charge or conviction for a sexual offence, an offence of indecency, violence or deprivation of liberty (whether indictable or not) or any other indictable offence and if the Applicant become so subject I will immediately notify the Club, cease the Applicant's participation at the Club and authorise the Club to take any action necessary to comply with its legal obligations.

I have had sufficient opportunity to read the above terms, I fully understand them, I understand that I have given up substantial rights by signing below and I sign voluntarily.

Parent / Guardian Signature	<input type="text"/>
Name	<input type="text"/>

Date	<input type="text" value=" / /"/>
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