

Participant Registration

For a sports program or coaching group. Complete guardian details when required for a minor participant.

Academy or club name

Registration date

Participant profile

Participant full name

Sport or activity

Age group

Participant or guardian phone

Email address

Emergency contact

Contact name

Relationship

Emergency phone

Support or access needs relevant to participation optional

Acknowledgment

I confirm these details are accurate and have received the program information and contact arrangements.

Participant or guardian signature

Date signed

Training details

Experience level

- ☐ New participant
- ☐ Some experience
- ☐ Experienced

Preferred training group

Academy office

Season or term

Assigned coach

Session schedule

- ☐ Registration reviewed
- ☐ Place offered

Store participant details securely and share them only with authorized staff.