

SBC 2009

2009 SERIES REGISTRATION FORM

To Enter: SIGN ON DAY, SATURDAY the 21st February at Bodyboarders Surf Co

PLEASE NOTE: NO ENTRIES WILL BE ACCEPTED AT BODYBOARDERS SURF CO BEFORE THIS DATE.

OR Complete the details below and post with a Cheque made payable

To: Sydney Bodyboard Club, PO Box 327, Narrabeen 2101 (last mail 20/2/09)

Cash or Cheques only, made payable to Sydney Bodyboard Club sorry no credit cards

Important: All applicants must sign entry form and applicants U/18 years of age must have entry form signed by Parent/Guardian.

Note: UNSIGNED APPLICATIONS AND APPLICATIONS WITHOUT MONEY WILL NOT BE ACCEPTED...

Entry Fee: \$150.00 each division Includes:

- Insurance levy covering all SBC events,
- Entry to SBC Club comps. See info sheet for comp dates
- Official Club Hoodie
- Membership to Bodyboarding NSW
- Special discounts and offers at BSC
- Chance of competing in the Port Macquarie Teams Challenge
- Presentation Night with dinner. (Trophy night)

Name: _____ D.O.B: _____

Address: _____ Post Code: _____ '08 SBC MEMBER: Y / N

Phone: _____ Email: _____

NEXT OF KIN NAME: _____ MOBILE PH: _____

T-Shirt Size: xsml sml Med lge x lge xx lge

In consideration of acceptance of my entry, I intend to be legally bound, do hereby for myself, my heirs and Heirs and administrators waive, release and forever discharge any and all rights and claims damages which may Hereafter accrue against the competition, its officials, employees, agents and contest sponsors, of any and all liability All liability and responsibility arising from any injury received or incurred by participating in this event. I will inspect the Contest area and assure myself that the area is safe for bodyboarding and further agree that the area conditions Are safe for bodyboarding purposes. Further I acknowledge that I voluntarily assume all risks arising from the conditions Relating to the use of the contest site and surfing area by myself or others I will comply with the GOB rules and any rules Announced at the event. I agree to the release of all official photographs and video footage taken during this event, and its Use by the director and sponsors.

Applicants Signature _____ Parents Signature _____

Myself or my parents can help out, Mornings Afternoons

Please tick the divisions you wish to enter

Grommets 11- 13 years of age at 31/12/2009

Cadets 14 – 15 years of age at 31/12/2009

Juniors 16 – 17years of age at 31/12/2009

Drop knee open age

Men's 18– 25 years of age at 31/12/2009

Women's open age

Senior Men's 25– 45 years of age at 31/12/2009

Grand Masters over 45 at 31/12/2009

Opens open age

Note: there are limited numbers for each division and positions will be allocated on a first in first served Basis. Completion of this form does not guarantee membership to Sydney Bodyboard Club. Please make preference of division on application.

SBC Proudly Supported By Bodyboarders Surf Co.

www.bodyboarders.com.au

SBC MEDICAL FORM AND CODE OF CONDUCT 2009

ALL APPROPRIATE DETAILS MUST BE COMPLETED FOR SAFETY PURPOSES.

contact information

Name: _____ D.O.B: _____

Address: _____ Post Code: _____

Phone: _____ Doctor: _____ Doctor Phone: _____

medical information

FURTHER INFORMATION OR SPECIAL INSTRUCTIONS FOR EMERGENCY ACTION PLEASE SPECIFY.

EPILEPSY	YES <input type="checkbox"/>	NO <input type="checkbox"/>	_____
FADING OR DIZZY SPELLS	YES <input type="checkbox"/>	NO <input type="checkbox"/>	_____
HEART CONDITION	YES <input type="checkbox"/>	NO <input type="checkbox"/>	_____
DIABETES	YES <input type="checkbox"/>	NO <input type="checkbox"/>	_____
EAR DISORDER	YES <input type="checkbox"/>	NO <input type="checkbox"/>	_____
ASTHMA	YES <input type="checkbox"/>	NO <input type="checkbox"/>	_____
ALLERGIES	YES <input type="checkbox"/>	NO <input type="checkbox"/>	_____
INSECT BITES ETC	YES <input type="checkbox"/>	NO <input type="checkbox"/>	_____
OTHER	YES <input type="checkbox"/>	NO <input type="checkbox"/>	_____

I hereby give my permission for Officials of the Sydney Bodyboard Club to seek any medical service that I, or my son / daughter may require in case of accident.

Applicants Signature: _____ Applicants Name: _____ Date: _____
(or Parent/Guardian if under 18)

Sydney Bodyboard Club code of conduct

- All competitors should exhibit a professional and sportsmanlike attitude when representing SBC at any event.
- Alcohol or drug abuse will not be tolerated while representing SBC. Offenders will be excluded from competition for the remainder of that year.
- Respect the rights, dignity and worth of all participants regardless of their gender, ability, cultural background or religion.
- Co-operate with Committee members, team managers and organisers of events.
- Obscene language will not be tolerated at any time.
- All athletes are expected to perform to the best of their ability at all times.
- If you are changing in a car park or near a competition area, always maintain decency.
- Avoid any behaviour that is deemed to bring the sport of Bodyboarding into disrepute.

I HAVE READ AND UNDERSTOOD THE 'CODE OF CONDUCT'. I AGREE TO ADHERE TO THE 'CODE' WHILST A MEMBER OF SYDNEY BODYBOARDING CLUB.

Competitors Signature: _____ Competitors Name: _____ Date: _____

ALL SBC COMPETITION ENTRIES MUST BE ACCOMPANIED BY A MEDICAL FORM.