**NSWPFA 2021 Membership Application**

**2021 Membership Fee – Player: Premier League & Reserve Grade: $100**

**1st Year Rookie, Development Player & Volunteer: Free**

**Player** [ ]  **Volunteer** [ ]

**Location: Valentine Sports Park, 235-257 Meurants Ln, Glenwood NSW 2768**

Name: D.O.B: / /

Address:

 Postcode:

Contact: Home Ph: Mobile:

Email:

**Athlete Member Details**

**NSWPFA Athlete Division:** Premier League [ ]  Reserve Grade [ ]  Development [ ]

**APFA Player Classification:** P1 [ ]  P2 [ ]  Not Classified [ ]  N/A [ ]

Disability:

Emergency Contact Person: Number:

*Only after a review and acceptance of this application, in conjunction with payment of any fees due, by the Board of New South Wales Powerchair Football Association, will a membership be approved.*

*I also acknowledge that by applying to become a member of NSWPFA Inc, I agree to, and will abide by, the APFA Member Protection & Code of Conduct Policy and support the intent with which they have being established. I fully understand that I may be disciplined for any breaches of these policies.*

NB: It is compulsory as part of our MPP that all officials and Volunteers / Students supply their ‘Working with Children Check’ registration number.

Signature: Date: / /

*(Parent or legal guardian if under 18 years old)*

**Playing Guard Care & Responsibility / Release of Liability Agreement / Media Release**

As a powerchair football athlete (or parent/guardian on behalf of the athlete), I realise the importance and responsibility of playing powerchair football safely with respect for others, the equipment of others, and my own equipment. I realise that the equipment used to play powerchair football is expensive and that by playing carelessly or recklessly I can cause permanent damage to this equipment and/or harm a fellow athlete.

I agree to play safely and within the rules of the game by using my guard properly and respecting the safety of fellow athletes. I will not recklessly ram/drive/kick my guard into other players and their equipment. I know that accidents can and do happen, but I am committed to protecting the equipment and safety of myself and others while playing powerchair football and will act accordingly. If my equipment becomes damaged (by my actions or the actions of others), it is my responsibility to repair or replace it. It is not the responsibility of NSWPFA Inc or APFA to repair or replace my equipment.

I, the undersigned parent and/or legal guardian of the individual or individual if 18 years of age or older (hereinafter referred to as the "Participant"), in consideration of and through my involvement in the sport and activities of powerchair football, acknowledge, appreciate and accept that:

1. The risk of injury from the activities (or use of equipment) involved in powerchair football is significant, including the potential for permanent paralysis, dismemberment and death, and while rules, equipment and personal discipline may reduce this risk, the risk of serious injury does exist; as well as loss or damage to property;

2. The Participant knowingly and freely assumes all such risks and assumes full responsibility for participation; both NSWPFA Inc and APFA recommend that individuals should seek independent professional advice on whether they should take out personal sporting insurance protection.

3. For the Participant and on behalf of his/her heirs, assigns, and next of kin, hereby release, hold harmless and promise not to sue “NSWPFA Inc and / or APFA Inc.”, their officers, officials, agents and/or volunteers, with respect to any and all such injury, paralysis, dismemberment, death and/or loss or damage to property (except in which it is a result of gross negligence and/or wilful and wanton misconduct).

4. NSWPFA Inc may at its own discretion and as deemed necessary, request of an athlete that is applying for membership, that they provide a doctor’s written release allowing them to play powerchair football.

By signing this Agreement I also give consent to the publication of written information pertaining to me (excluding medical or health information) and to the publication of my personal image and performance results, for non-commercial educational, promotional and archival purposes for the sport.

Signature: Date: / /

*(Parent or legal guardian if under 18 years old)*

\*\* All Membership applications are conditional on the approval of the Board Of Directors of the New South Wales Powerchair Football Association Incorporated, the signed playing guard care & responsibility, release of liability & media agreements on this form, must also be signed as acceptance before approval can be considered.