

# TO REGISTER...

Complete this registration form then drop it in or bring it with you on the first day!

Name \_\_\_\_\_

DOB \_\_\_\_\_  Male  Female

Address \_\_\_\_\_  
\_\_\_\_\_

Medicare Number \_\_\_\_\_

Medical Conditions (medications, injury, illness, disability, allergies or dietary):  
\_\_\_\_\_  
\_\_\_\_\_



Parent / Guardian

Name \_\_\_\_\_

Mobile Number \_\_\_\_\_

By signing below, I give permission for The Salvation Army to:

Use photographs of your child without your child's name for The Salvation Army's Moree Holiday program promotional purposes.

In an urgent emergency every effort will be made you to contact you should your child require medical treatment beyond first aid. In the event you are unavailable, your child will receive treatment as the program coordinator may deem necessary.

This information will be used in accordance to The Salvation Army's privacy policy that can be accessed at: <http://salvos.org.au/about-us/governance-and-policy/privacy-policy/>

Use name and contact details in a secure directory for activity participants in providing information about future children, youth and family activities.

Signature \_\_\_\_\_

Parent / Guardian