

# Redcliffe City Physical Culture Club - 2020 Membership Form

(One form per member)

**PLEASE PRINT CLEARLY**

NAME - FIRST:

DOB:            /            /

LAST:

AGE: (AS AT 31<sup>ST</sup> AUGUST, 2020)

ADDRESS:

SUBURB:

POST CODE:

EMAIL ADDRESS:

SCHOOL:

EMERGENCY CONTACT (1) NAME:

NUMBER:

EMERGENCY CONTACT (2) NAME:

NUMBER:

**Where did you hear about us?**

**Name of siblings/family members also registering with RCP (if applicable):**

**Please list any pre-existing medical conditions/injuries or allergies and attach any management plans in place.**

**If you're new to RCP in 2020 but have done physie before:**  
**- Which club did you attend?**  
**- What year did you last compete?**  
**- What age group were you in?**

**Do you have a business/skill that might be of interest to the club? Please provide details.**

**PLEASE TICK TO SHOW YOU HAVE READ AND UNDERSTAND THE FOLLOWING:**

	<p>The 2020 registration fee includes BJP and RCP registration, public liability insurance, practice material, entry fees to BJP annual competitions, and a member gift. Class fees are calculated on a timetable for classes that cover 38 weeks. The registration fee covers all regular scheduled lessons per week in accordance with the standard timetable. <b>I understand that extra/private lessons made available to me will incur an extra cost.</b></p>
	<p>I will promptly pay any monies I owe to the club by the given due date. I will check invoices addressed to me and raise any concerns regarding fees via email. <b>I understand that Facebook, text messages or phone calls in regards to fees will not be answered</b> as the club needs to maintain records of the information discussed.</p>
	<p><b>I understand that all communications will be made available to me via email OR the members portal.</b> It is my responsibility to check and retain emails/correspondence in order to remain up to date with club information.</p>
	<p>If I RSVP for a club event or activity where there are costs involved, I will pay these costs in full by the given due date. <b>I understand that if I change my mind and choose not to attend, these monies will not be refunded.</b></p>
	<p>If I wish to withdraw from classes at RCP during the 2020 physie year, I will inform the club via email as soon as possible. <b>I understand that class fees and registration will not be refunded.</b></p>
	<p>The 2020 syllabus and all media used have been supplied by BJP and are covered by copyright laws. <b>I will not endanger the clubs access to use BJP media by making copies for my own use or distribution elsewhere.</b></p>
	<p><b>Personal Accident Insurance is not offered by RCP.</b> I will make my own arrangements through my private health insurance or equivalent to cover any requirements I have or may need.</p>
	<p>If my contact details change throughout the year, I will inform the club via email as soon as possible.</p>
	<p>On occasions, photos or videos are taken of club members and supporters. I allow my/my child's photo to be taken and/or used in paper format publications (newsletters, newspapers, flyers, ect) AND in online format publications (club website, social media, ect). <b>I understand that not giving my consent to this may result in me/my child missing out on full club member photos.</b></p>
	<p><b>I agree to follow the BJP member's, parent and spectators Code of Conduct</b> (as outlined in the members portal). I acknowledge that failure to follow the Code of Conduct may result in immediate loss of membership.</p>
	<p>I understand that Physie is a competitive sport and as a registered member of RCP, I agree to attend competitions if selected or invited.</p>
	<p>I agree to wear the correct class and competition attire to all lessons and competitions, as outlined on the RCP website.</p>

NAME: \_\_\_\_\_

SIGNED: \_\_\_\_\_

DATE:        /        /

For all members under the age of 16yrs, a parent/carers is required to sign this form.

**Thank you for registering with RCP!**