

*Name: *Age (tick one of the following)				
Name.	1	of the following)		
	☐ Under ☐ 18-24	18 ☐ 25-34 ☐ 45 and over ☐ 35-45		
Gender:	*Contact Num			
Address:	Suburb:			
	Post code:			
Emergency contact name:	Emergency co	ntact number:		
Cultural Background:		Do you identify as an Aboriginal or Torres Strait		
	Islander? (circl	e response) Yes / No		
How did you find out about the program	1?			
COVID-19 Health and Safety				
1. If you are feeling sick and/or experien	ncing symptoms of COVID-19,	you must not participate in or attend the		
Juccel Flugraili.				
2. You must abide by The Big Issue's CO	VIDsafe Work Plan.			
3. If you choose to participate in the So	ccer Program, you agree that,	notwithstanding any precautions taken,		
you may come into contact with indiv	/iduals who have COVID-19 \	Ou understand agree to and agree this		
risk and release us from any liability o	or claim in connection with thi	is risk.		
 VHAT THE PROGRAM IS ABOUT Fun and having a go Learning Getting fit, having better health an health Respect 	• Su to ad mental • M	E PROGRAM EXPECTS apporting your teammates and working gether eeting different people and bring people om across the community together Thanks! You're playing well today!		
FairPlay Respect & Fair Play	Supportive behaviour	Positive language		
· · · · · · · · · · · · · · · · · · ·	Ťİ	Safe Place "		
Open to all Religions and cultural	Open to all Genders &	Drug/Alcohol Free Zone		

I agree to participate in the program and respect this Code of Conduct and the attitude and behavior encouraged by the Coach.

Sexualities

*Signed:*Date:	. /	/	
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backgrounds