

## Sport Science - VX Sport GPS Technology

Thursday 25<sup>th</sup> June, 2020 Registration Form



Section 1: Personal Details		
Name		
Date of Birth		
Address		
Address		
Mobile Phone Number		
Email Address		
School		
Do you identify as: (please tick if	Aboriginal	□ Both Aboriginal and Torres
applicable)	□ Torres Strait Islander	_
Section 2: Medical and Dietary Requirements		
Please list any medical conditions: (e asthma, allergies, diabetes, etc)		
Please list any medication required		
to be self-administered:		
Please list any dietary requirements you may have:		
Section 3: Emergency Contact Details		
	<u> </u>	
Name:		
Relationship to student:		
Phone Number:		
Section 5: Declaration		
Declaration by student		
I accept the conditions of my registration and understand that I will be required to follow the instructions of UniSA staff during the program.		
Student Signature		
Declaration by Parent/Guardian		

I accept the conditions of registration for my daughter/son to attend the STEM For Humanity. In the case of a medical emergency, I consent to my daughter receiving medical treatment and I accept liability to meet the cost of this treatment.

**Parent/Guardian Signature:**