

Attachment: Athlete Training Profile form

To Be Complete By Athlete:

Name: _____ DOB: _____

Age Group: _____ Training Level: _____

Why I want to do Surf training: _____

My Hobbies: _____

My Sporting Heroes are: _____

To Be Complete By Parent/Guardian:

Name: _____ Goal for Child: _____

Parent Contact: _____ Alternate Contact: _____

Injury/Illness History: _____ Current Injury: _____

Photo's/images please (circle one)

Yes: I agree to my child's photo/image being put on the clubs Facebook / Instagram, web page and use on social media.

No: I would not like my child's photo/image being put on the clubs Facebook / Instagram, web page and use on social media.

I can offer Assistance:

Water Safety: I have my SRC or Bronze Yes / No

Officiating: Yes/No

Able to assist looking after siblings on Beach: Yes/No

Able to assist with any other duties as required: Yes/No