

## Year 9-12 Boy's Winter Rowing Registration Form

Student Name:	JTC Email address:			
	Parent / Guardian Co	ontact Details (comple	ete if new rower)	
	Parent 1	, <u>-</u>	<u>Parent</u>	<u>2</u>
N	Jame:		Name:	
P	Phone:		Phone:	
Email:		Email:		
S	uburb:		Suburb:	
FEES #				
1st Rower	@ \$200			\$
2nd Rower	@ \$175			\$
Coxswain	@ Free			\$ 0.00
	ing update @ \$10 each ONLY – cap must be handed in WITH regist.	ration form)		\$
New rowing cap plus stitching (ALL NEW ROWERS) @ \$30 each				\$
Total amount due				\$
EFT is our preferr	ed payment method and the detail	s are:		
	John XXIII Rowing Club	BSB: 036-063	Account: 181149	
Please include rov	ver's name as 'bank description' ar	nd attach EFT receipt to	registration form.	
	EFORE training starts. New rowers are give 100 to cover rowing programme costs. Ref			
	nave a relevant medical condition letails to the rowing coordinator.	on or allergy? Y / N		
Can your child su	accessfully swim 50m? Y/N			
Do you agree for	the club to share photos of you	child on Rowing Club S	Social Media? Y / N	
Do you agree for	the club to share your contact d	etails with other pare	nts for car-pooling purp	oses? Y/N
Parent Signature:			Date:	