



UNITED VOLLEYBALL CLUB WA INC.



PARENT / LEGAL GUARDIAN CONSENT FORM

Dear Parent/Guardian:

We are pleased that your child has chosen to participate and represent the United Volleyball Club WA Inc. (UVCWA) in the WA Volleyball Junior League (WAVJL). As a participant, there are both financial and safety obligations that need to be met. We kindly ask that you read the following information in the attached files and sign the form below to give your consent.

Financial Obligation: Your child's participation involves payment for their team registration fees and any additional fees associated with their training and game day. All fees must be paid on time for your child to participate in the program.

Safety Obligation: Your child must follow all safety guidelines set forth by our program. This includes wearing the appropriate safety equipment, following the rules of the sport, and maintaining a safe environment.

UVCWA Inc. is committed to the safety and wellbeing of children and young people who participate in our club's activities or use our services. We support the rights of the child and will act at all times to ensure that a child safe environment is maintained.

Photo Permission: We ask for your permission to take and use photographs of your child [named below]. We would like to use these photographs in our United Volleyball Club WA Inc. newsletter, website and promotional materials in the social media.

The photographs will be used solely for the purposes stated above and will not be used in any other way. Furthermore, we will not use any identifying information about your child.

We are very excited to include your child in our materials and would love your permission to do so. If you are in agreement, please tick the appropriate box below.

Yes, I give photo consent to United Volleyball Club WA Inc.

No, I do not give consent for my child's photo to be used by United Volleyball Club WA Inc.

By signing this form, you are giving your consent for your child to participate in our volleyball club. You are also agreeing to meet the financial and safety obligations of the program.

If you have any questions, please don't hesitate to contact us.

Sincerely,

United Volleyball Club WA Inc.
junior@uvcwa.com.au

Child's Name _____

Parent/Guardian _____

Signature _____ Date _____