

**Get Active Now Girls Program
Participation and Consent Form**

For all Participants in Get Active Now Girls Training Program

Participant Name:

Postcode:

Participant's Email Address:

Participant's Telephone:

Participant's Date of Birth:

Participant's Gender: **Female** **Other**

Please list any relevant conditions that may affect your participation:

- I have been provided with a copy of the Terms and Conditions for the Get Active Now Girls Cycling Safety Program.
- I have read, understood and agree to the Terms and Conditions for the Get Active Now Girls Cycling Safety Program.

Declaration of participant

I _____ (**Participant**) have read and agree with the entry conditions of the Get Active Now Girls Cycling Training Program.

Participant's signature _____

Date _____

Or declaration and consent of parent/guardian

I am the Parent or Legal Guardian of the Participant who is under the age of 18. I have read and agree with the entry conditions of the Get Active Now Girls Training Program and I authorise and consent to the Participant participating in the Program. In consideration of the Participant's participation in the Program being accepted, I expressly agree to be responsible for the Participant's behaviour and agree to accept in my capacity as parent or guardian, the terms set out in this form.

Parent/Legal Guardian Name (please Print) _____

Parent/Legal Guardian signature _____

Date _____

Please tick this box if you **do not want** personal data on the Participant released to Wheel Women or the Amy Gillett Foundation for marketing purposes. No personal information will be released to any external party if you tick this box.

Emergency contact details:

Emergency Contact Name:

Relationship to Participant:

Telephone: (W) (H) (M)