

Name: _____

TEAM: _____



Private & Confidential

Athlete Profile – 2015

For and on behalf of the Club and Football Queensland Ltd

This document includes

Family Information

Health Details

Media & Publicity Consent

Privacy & Confidentiality Statement

Athlete Behaviour Agreement

Parent or Guardian Acknowledgement

The information requested in this document will replace all information collected previously and will be used as a single point of reference. All the information collected prior to the return of this document will be destroyed on receipt of this document.

This statement / agreement are for the sole purpose of providing for the wellbeing of the hereunder named athlete and for the best interest of the team of which he/she is an integral part.

**This Document must be completed by a Parent or Guardian.
Please write clearly so that the correct data can be entered.**

ATHLETES NAME			
Given Names		Surname	
PLEASE PRINT CLEARLY & CIRCLE YOUR CHOICES			
Date of Birth			
Birth certificate No.			
Passport No.			
Expiry Date			
Religion (voluntary info.)			
NPL CLUB NAME			
Who Does The Athlete Reside With	Family	Father	Mother
First Point of Contact	Father	Mother	
Father's Given Name & Surname			
Mother's Given Name & Surname			
Address - Residential (Family / Father)			
No./PO Box			
Street Name			
Town / Suburb			
Postcode			
Home Phone No.			
Mother's Residential Details (Only if different to Father)			
No./PO Box			
Street Name			
Town / Suburb			
Postcode			
Home Phone No.			
Contact Details			
Father's Details:			
Work Phone No.			
Mobile No.			
Fax No.			
Email Address: Please Print Clearly			
Mother's Details:			
Work Phone No.			
Mobile No.			
Fax No.			
Email Address: Please Print Clearly			

Athlete Medical History / Profile			
Athlete's Family Physician			
Contact Details / Phone No.			
Medicare No.			
Number on Card		Expiry	
Private Health Fund Name			
Card Number		Expiry	
MEDICAL INFORMATION	INDICATE	DETAILS	
Heart problems	Yes / No		
Asthma	Yes / No		
Respiratory problems	Yes / No		
Travel sickness	Yes / No		
Abnormal blood pressure	Yes / No		
Operations	Yes / No		
Epilepsy / Fits of any kind	Yes / No		
Recent illness	Yes / No		
Recent Injections & When	Yes / No		
Tetanus Injection & When	Yes / No		
Diabetic	Yes / No		
Drugs required	Yes / No		
Drug reactions (eg penicillin allergy)	Yes / No		
Phobias	Yes / No		
Migraine	Yes / No		
Dizzy spells	Yes / No		
Sleep walking	Yes / No		
Food allergies	Yes / No		
Other allergies	Yes / No		
Allergic to paracetamol	Yes / No		
Special dietary requirements (no likes or dislikes)	Yes / No		
Currently on any medication	Yes / No	If yes, please complete below	
Has parent's / guardian's consent to self administer medication	Yes / No	If no, please provide instructions below	
Medications - Prescribed			
Any other pre existing medical conditions			
Any other issues			

A Third point of contact if required in an Emergency		
Given & Surname Names		
Relationship to Athlete		
Home Phone No.		
Work No.		
Mobile Phone No.		
Publicity & Media Consent		
	Please circle your choices	
Team Photos	Yes	No
Individual and Group Action Photos for purchase	Yes	No
Individual Photos for publication – media (press / tv)	Yes	No
Individual Photos for publication – web	Yes	No
May be interviewed <u>with</u> the presence of a team official	Yes	No
<p><u>Please Note:-</u></p> <p>Every effort will be taken to fulfil your expressed wishes. However, should a third party beyond the effective control and without the knowledge of (a) the team management, (b)the club, (c) the officiating body, acts outside of your expressed wishes, any member of the team management, the club or Football Queensland Ltd cannot be held responsible. It should also be noted that the media (including press / tv) might be invited by Football Federation Australian Ltd or one of its affiliates to use both action shots and action footage for promotional purposes. In any official event apart from the team photo, every effort will be taken to protect the athlete’s identity should they become exposed.</p>		

Privacy & Confidentiality Statement / Contract

All information collected on this Athlete Profile Document along with any other information that has been collected either manually or electronically is collected in accordance with the relevant privacy policies of both Football Queensland Ltd and Football Federation Australia Ltd.

Athlete Agreement

The athlete acknowledges and agrees that as a member of a football team representing his/her club and Football Queensland, he/she is bound by the understanding that there are certain standards of behaviour that are expected of him/her. Such standards will be conveyed to the individual and/or to the team as a whole from time to time during the course of the season. Should this athlete or any other athlete fail to satisfy these expectations they will be directed to align their behaviour with the expectations of the team management that are in accordance with his/her club and Football Queensland’s guidelines. Should this athlete or any

other athlete persist with their disregard of such directives, they may be withdrawn from the team.

Parent or Guardian Acknowledgement

The parent or guardian acknowledges that the club together with Football Queensland Ltd, through its representatives, will have the responsibility of insuring for the wellbeing of this athlete (next of kin, foster child or otherwise) during the season. The parent or guardian also acknowledges that this athlete is bound by the expectations of the Athlete Agreement above and further that the athlete fully understands the cause of action that will be taken should they create a situation that requires such action from the team management.

Parent or Guardian Declaration

I the Parent or Guardian who has completed this Athlete Profile document do hereby declare that I have done so to the best of my ability and that I have also read and accept the Publicity & Media Consent, the Privacy & Confidentiality Statement, the Athlete Agreement along with the Parent or Guardian Acknowledgement.

This is to be done by printing the athlete's name, your name, signing, and dating and then inserting the word 'yes' in the space provided hereunder.

Athlete Name	
Parent or Guardian's Name (print)	
Parent or Guardian's Signature	
Date	
Acceptance of the Media Consent, the Privacy & Confidentiality Statement, the Athlete Agreement and the Parent or Guardian Acknowledgement.	Insert the word "yes" here

Once completed please return this to:

**Janelle Sothmann
General Manager
SWQ Thunder FC
PO Box 963
Dalby QLD 4405**

Please retain a copy for your records.