

**PLAYERS MEDICAL HISTORY**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal Details** | | | | | | | | | |
| First Name |  | | | | Last Name |  | | | |
| Residential Address |  | | | | | | | | |
| Home Phone |  | | | Mobile | | |  | | |
| Gender | Male / Female | | | Date of Birth | | |  | | |
|  |  | | |  | | |  | | |
| **Emergency Contact** | | | | | | | | | |
| First Name |  | | | Last Name | | |  | | |
| Address |  | | |  | | |  | | |
| Home Phone |  | | | Mobile | | |  | | |
| Relationship |  | | |  | | |  | | |
|  |  | | |  | | |  | | |
| **Medical Details** | | | | | | | | | |
| Doctors Name | |  | | | Phone | | |  | |
| Medicare Number | |  | | | Blood Type | | |  | |
|  | |  | | |  | | |  | |
| **Do you have any allergies? Yes / No** | | | | |  | | |  | |
| If 'Yes' please explain… | | | | |  | | |  | |
|  | | | | | | | | | |
| **Do you agree for the Team Manager, Coach or on-site medic to administer the following pain relief: (✓or X)**  ( ) Paracetamol (Panadol) ( ) Ibuprofen (Nurofen) ( ) Codeine based pain killer (Nurofen Plus/Panadeine Forte)  **Do you have any pre-existing medical conditions (i.e. Asthma, Diabetes, Epilepsy) ?** | | | | | | | | | |
| **Yes / No** | | |  | | | |  | |  |
| If 'Yes' please explain… | | | | | | |  | |  |
|  | | | | | | | | | |
| **Do you suffer any pain in any joints when playing sport or do you have any current** | | | | | | | | | |
| **or recurring injuries? Yes / No** | | | | | | |  | |  |
| If 'Yes' please explain… | | | | | | |  | |  |
|  | | | | | | | | | |
| **Do you require any taping or padding for a previous injury? Yes / No**  **\*please provide own taping for games.** | | | | | | | | | |
| If 'Yes' please explain… | | | | | | |  | |  |
|  | | | | | | | | | |
| To the best of my knowledge, all information contained on this form is correct. | | | | | | | | | |
| (If under 18 please have parent/guardian complete and sign) | | | | | | | | |  |
|  | | |  | | | |  | |  |

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**



**PLAYERS CODE OF CONDUCT**

**(Please sign and return this form to your Team Manager)**

Sunshine Coast Phoenix Players are expected to always conduct themselves in a professional and respectable manner. Players need to conduct themselves in a manner that will promote positive effect on those who look up to them and to those who support them.

* Smoking is prohibited, as is the use of any prohibited drugs. This is obviously detrimental to athlete's performance and the use of these will not be tolerated and will result in an automatic expulsion from the team.
* By undersigning this, athletes agree to undertake a random drug test at any time when requested by the coaching staff.
* The use of any alcohol will be strictly limited to players over the age of 18. Excess use that results in poor performance, poor body condition and/or poor behavior will come under strict review.
* All appointment and training schedules need to be attended to by all players. Players will turn up to trainings, fitness sessions and meetings on time and ready to train unless adequate notice has been given to the coaching staff for legitimate purposes to excuse themselves from these sessions.
* Injured or sick athletes are still required to turn up to trainings and meetings if able to do so, unless otherwise advised by the coaching staff.
* Athletes are required to be fully available for the BQJBC season including State Championships unless otherwise approved by the Head Coach. Players who pull out of State Championships will only be refunded if there is someone to take their place.
* Athletes are also required to represent the Sunshine Coast Phoenix to a high standard when playing at school, domestic competition and National teams.
* Any player who brings the SCBA in disrepute through their personal actions or involvement in an incident will be dealt with under the 3 strikes system. (Verbal Warning, Written Warning, Expulsion)
* All junior representative players must play in the domestic fixtures with their local club (Noosa, Caloundra or Maroochydore)
* All players must be prepared to follow reasonable instructions from the Coach, Assistant Coach and Manager.
* Be prepared to stay in accommodation decided by the association Management for event such as the State Championships.
* You must be prepared to pay an equal share of any team fees, team nomination, team travel and any other personal team costs where advised by the SCBA.
* Understand that the coach has an obligation to do the best he/she can for the team and the Association in regard to playing time as stipulated in Appendix A. It should be noted that in some cases players might receive no court time at all if deemed necessary on the day.
* Players are to abide by the social media code of conduct as detailed in Appendix B.

I also agree that if I fail to abide by the aforementioned rules and guidelines, I will be subject to disciplinary action, which will be decided by the SCBA board on a case-by-case basis.

**I have read the Sunshine Coast Basketball Associations Player Code of Conduct and agree to comply with the terms and conditions, behavioral expectations and processes as advised.**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_**



**PARENTS AND SUPPORTERS CODE OF CONDUCT**

**(Please sign and return this form to your Team Manager)**

Sunshine Coast Basketball Association seeks to instill positive character-building traits in our youth through the demonstration of good sportsmanship, respect for others, responsibility, fairness, caring and good citizenship.  We ask that parents and their guests attending SCBA events help us by reflecting these character traits at games. When attending SCBA events, I therefore agree to the following, where I will;

* Be a positive role model for my child and encourage sportsmanship by showing respect and courtesy, and by demonstrating positive support for **all** players (including the opposition), **all** coaches, officials and spectators at every game, practice or other event.
* Not engage in any kind of unsportsmanlike conduct with any official, coach, player, or parent such as booing, taunting or using profane language or gestures, etc.
* Not encourage any behaviors or practices that would endanger the health and wellbeing of the athletes.
* Teach my child to play by the spirit of the rules and to resolve conflicts without resorting to hostility or violence.
* Demand that my child treats other players, coaches, officials and spectators with respect regardless of race, sex, or ability.
* Never ridicule or yell at my child or other participant for making a mistake or losing a competition.
* Respect the officials and their authority during games and will never question, discuss, or confront coaches or referees at the game field, and will take time to speak with coaches at an agreed upon time and place. There is provision *within the rules* for the coach to question rulings of referees when he/she seems fit to do so and at no stage should the parents/supporters do so.
* Refrain from coaching my child or other players during games and practices, unless I am one of the official coaches of the team.
* Inform the coach of any physical disability or ailment that may affect the safety of my child or the safety of others.
* Acknowledge that I/we are will be required to attend to score bench duties according to the roster the team coach/manager arranges and that if I/we are unable to attend the schedule duty a $25 fee will be payable.
* Abide by those items set out in the Social Media Code of Conduct
* If I have any unresolved issues with the coaching staff or officials, contact the Director of Coaching for the SCBA

I also agree that if I fail to abide by the aforementioned rules and guidelines, I will be subject to disciplinary action that could include, but is not limited to the following:

* Verbal warning by official, head coach, and/or member of the SCBA Board or Sub-Committees
* Written warning by the SCBA - Board
* Parental game suspension with written documentation of the incident
* Parental season suspension

**I have read the Sunshine Coast Basketball Associations Parent Code of Conduct and agree to comply with the terms and conditions, behavioral expectations and processes as advised.**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_**