



# PLAYER REGISTRATION FORM

## GENERAL INFORMATION

### Legal Name (required)

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Other: \_\_\_\_\_

Note: Your legal name is required so that you can be covered legally by our insurance.

### Preferred Name (optional)

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Note: If you do not wish to be addressed by your legal name, please provide us with the name you prefer to be addressed by. We will refer to you by this name always and use this name as your official Battlecry account name. Your legal name will never be disclosed to other individuals unless explicit permission is provided by you, and will only be used in emergencies where a legal name is required.

Date of Birth: \_\_\_\_\_ Gender (circle): Male - Female - Other

Street Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Contact Number(s): \_\_\_\_\_

Email Address: \_\_\_\_\_

How did you find out about Battlecry?

- Posters/Flyers/Cards
- Through friends or family
- Facebook/Internet
- Our website
- Other \_\_\_\_\_

How experienced are you in LARP?

- Which end do I poke them with?
- I have LARPed once or twice.
- I know what's going on most of the time.
- Bring on the dragons!

If you have attended any other LARPs please list them:

\_\_\_\_\_

## MEDICAL CONDITIONS

- Ambulance cover  - Drug allergies (please list): \_\_\_\_\_

- Environmental/insect allergies (please list): \_\_\_\_\_

- Food allergies (please list): \_\_\_\_\_

- Diabetes  - Compulsory eyewear  - Heart conditions  - Recent injuries

- Asthma/Inhaler  - Epilepsy  - Neck/Back injuries  - Current medication

Other medical conditions or additional information, please describe below:

\_\_\_\_\_

## EMERGENCY CONTACTS

### Primary Contact (required)

First Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Relation: \_\_\_\_\_

Contact number: \_\_\_\_\_

### Secondary Contact (optional)

First Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Relation: \_\_\_\_\_

Contact number: \_\_\_\_\_

## OFFICE USE ONLY

- New Player Induction New Player Inductor: \_\_\_\_\_

Inductor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Privacy Policy

The information disclosed above is to allow us to better understand our player's needs, and to help us improve our products, services, and the experiences we provide to our players.

In particular, the information will be used for the following:

- Internal record keeping.
- Product and service improvement.
- Player safety and well-being.
- Insurance coverage.

## Information Security

We are committed to ensuring that your information is secure regardless of the format in which we hold it (electronic and hard-copy forms). In order to prevent unauthorised access or information disclosure, we have put in place suitable physical, electronic and managerial procedures to safeguard and secure the information we collect.

## Other Information

- Battlecry will not tolerate rude or abusive behaviours towards its participants or staff members.
- Battlecry management reserve the right to remove any participant from the game at any time.
- Battlecry is built on an honour system, cheaters are not welcome.
- **This is a game, treat it that way.**

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## PLAYER STATEMENT

I, the above-named person, for myself, my heirs and executors **ACKNOWLEDGE** and **AGREE** that:

1. I have read and understand the rules and handbook of Battlecry.
2. I am fully aware of the nature and purposes of the activities of Battlecry as outlined in its Rules, and that the same are potentially dangerous.
3. By becoming a member of Battlecry and participating in its activities I voluntarily accept the risks.
4. I shall be bound by the rules of Battlecry, obey the proper directions of all authorised officials, and accept their decisions.
5. I shall indemnify and keep indemnified Battlecry and all members thereof, whether officials or not, from and against all claims, actions, proceedings and demands of whatever kind relating to any injury, loss or damage whatsoever and howsoever caused to my person or property arising out of, or in connection with, my participation in Battlecry games.
6. I understand the purpose and the effect of this document.
7. I am over 18 years of age.
8. If I am under the age of 18, I have been given explicit permission to participate by both an authorised member of the Battlecry organisational team, and by my parents(s)/legal guardian(s).

Participants Name (printed): \_\_\_\_\_

Participants Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### If under the age of 18:

Parent/Guardian Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Authorised member of the Battlecry organisational team: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_