



Waitakere Gymnastics Membership Application 2022



I wish to apply for membership of **Waitakere Gymnastics Club Incorporated** ("Club") located at Olympic Park, Portage Road, New Lynn, Waitakere City, and in doing also apply for membership of **Gymnastics NZ Incorporated** located at Level 2, 6 Arawa Street, Grafton, Auckland.

This form has been prepared to ensure compliance with the Privacy Act 1993 and the Incorporated Societies Act 1908. Please complete all spaces on the form for each person applying for membership. Failure to complete all spaces may result in refusal to accept membership. For more information please refer to the Gymnastics NZ Membership Data Regulation. If the gymnast is under 18 years, the parent/guardian/caregiver should complete this form for the gymnast as detailed below.

Class Details

Class	Day	Mon	Tue	Wed	Thu	Fri	Sat
Time	Competitive Level/Step						
Class Fee	Affiliation Fee (annual fee)			Start date			
A gymnast place in a class will only be secured if full payment of all fees accompanies this application form. Bank details are ASB 12-3070-0083597-00. Acceptance of class enrolment is subject to availability of positions in a class.							

Gymnast Details

Surname		First Name					
Address							Postcode
Phone: Home	Mobile		Gender		Male Female		
Email							
School					Date of Birth		
Ethnicity (optional)		Competition no.		Existing member		Yes No	

Parent/Caregiver

Mothers Name							
Phone: Home	Mobile		Work				
Occupation		Email					
Fathers Name							
Phone: Home	Mobile		Work				
Occupation		Email					

Emergency Contact (incase neither parent is unable to be contacted in an emergency)

Name		
Phone: Home	Mobile	Relationship

Medical Conditions (additional space over page if required)

Please list any medical conditions that may impact on the gymnast participating in Gymnastics NZ. Please read paragraph 6 over page.

In the unlikely event of injury or illness occurring while the gymnast is participating in Gymnastics NZ, the Club or Gymnastics NZ (as applicable) will make every effort to contact the parent or other contact(s) listed above. By signing this form you authorize the Club to administer such first aid as it considers necessary.

Information from sponsors

I agree that Gymnastics NZ or my Club may contact me from time to time to provide me with information about the products and services of my Club or Gymnastics NZ sponsors or funders.

Agree **Disagree**

Declaration

Parent/guardian/caregiver consent for gymnasts under 18yrs:
I am the parent/caregiver of the gymnast who is under 18 years of age. I Have read and understood this form and the Membership Declaration. I consent to the gymnast's application for membership on the basis set out in this form and the Membership Declaration (over page).

I also consent, or am authorized to consent, to all the contact details specified in this form being held by the Club and Gymnastics NZ for the purposes of contacting any of the person(s) named in an emergency involving the gymnast. If I am not a member myself, I also consent to my name and contact details as set out above, being collected, held, and used as the gymnast's parent/caregiver in accordance with the purposes set out paragraph 7 of the Membership Declaration (over page) as if I were a member of Gymnastics NZ.

I have read and consent, or am authorizing to consent, to the Membership Declaration (over page).

Signature **Date**

MEMBERSHIP DECLARATION

1. **Accuracy:** The details set out in this Membership Form are true and correct. If they change I acknowledge that I am required to notify my Club of the changes in writing as soon as possible after they occur. If the details provided are not true or are misleading I acknowledge my membership may be terminated at the discretion of my Club and Gymnastics NZ.
2. **Bound by Rules:** I will be bound by the constitutions, regulations, policies, manuals, guidelines and reasonable directions of my Club, and Gymnastics NZ.
3. **Accept Risk of Gymnastics NZ:** I have voluntarily accepted and assumed the Inherent risk of danger and injury in Gymnastics NZ.
4. **No liability:** I will not hold my Club or Gymnastics NZ or their respective officers responsible for any claims, losses and expenses and costs (including legal costs) which may arise from or in connection with my membership and/or participation in any activity authorised or recognised by my Club or Gymnastics NZ except in the case of gross negligence or a wilful act or omission on the part of my Club or Gymnastics NZ.
5. **Indemnity:** I indemnify my Club and Gymnastics NZ from all claims, losses and expenses (including legal costs) suffered or incurred at any time as a result of, or resulting directly or indirectly from, my failure to observe the constitutions, regulations, policies, manuals, guidelines and reasonable directions of my Club and Gymnastics NZ respectively.
6. **Medical Declaration:** I am medically and physically fit and do not suffer from any Injury, disease or condition, either physical or mental, that would affect my ability to safely participate in any authorised or recognised activities of my Club or Gymnastics NZ. If I am unsure about this declaration, or suffer from such a condition I have either listed it on this form or I am aware that I must bring it to the attention of my Club and Gymnastics NZ.
7. **Privacy:** I agree that my Club and Gymnastics NZ can collect, hold, use and disclose my personal Information as provided on this Form (and any updated or additional personal information the Club or Gymnastics NZ obtains from me including any photo or other record of my image) for the purposes of:
 - a. Processing my application for membership Including notifying the Club and Gymnastics NZ of the information on this form for the purposes of the Club and Gymnastics NZ compiling a register of members, compiling a national database of members and participants (accessible only in accordance with the Constitution and Regulations of Gymnastics NZ), and for requesting me to renew if my membership lapses;
 - b. Putting my name and contact Information on my Club's membership list for use by other members of my Club;
 - c. Publishing any of my Gymnastics NZ results in my Club and/or Gymnastics NZ's newsletters and on their websites;
 - d. Selecting and publicly naming competitors and teams to represent my Club and Gymnastics NZ at Gymnastics NZ events;
 - e. Providing me with Information and activities relating to my Club and Gymnastics NZ and other Gymnastics NZ matters;
 - f. Including my photograph or other Imagery on the Club and/or Gymnastics NZ website, in newsletters, annual reports, or similar official publications;
 - g. Enabling my Club and Gymnastics NZ to contact me with information about the products and services of Club or Gymnastics NZ sponsors or funders (unless I have opted out of receiving such information on the Membership Form);
 - h. Enabling my Club and Gymnastics NZ to comply with any statute, regulation, by-law or other regulatory Instrument that requires collection or disclosure of personal Information;
 - i. Retaining the information provided on this form If my membership lapses (as an inactive member) for a maximum period of three years for the above purposes; and
 - j. Any other purpose I agree to in writing.
8. **Use, Security and Access:** I understand that my personal Information will only be used for the purposes listed in paragraph 7 and in accordance with the Gymnastics NZ Regulations, and that:
 - a. My personal Information will be held securely;
 - b. I will have access to my personal Information under the Privacy Act;
 - c. My personal information will be corrected upon request.
9. **Continued Membership:** I understand that upon payment of my membership fee(s), if I am accepted to membership, I will become a member of my Club and Gymnastics NZ and that by paying such fee(s) by the due date(s), I will continue to be a member of my Club and Gymnastics NZ for the duration of my Membership as specified on this form and in accordance with the Gymnastics NZ Constitution, unless I resign or my membership is terminated.
10. **Interpretation:** Every reference to "I" and "my" in this document includes the gymnast and the parent/guardian/caregiver of the gymnast (if applicable).

Copies of constitutions, regulations, policies, manuals and guidelines of the Club and Gymnastics NZ can be obtained by contacting your Club or Gymnastics NZ via www.gymnasticsnz.com .

Additional Medical information

Please use this space for any additional medical information.

Referral source

Website Advertisement School visit Holiday programme Friend Other