



**EMMAUS COLLEGE**  
ROCKHAMPTON

185 Main Street and 362 Yaamba Road  
North Rockhampton QLD 4701  
PO Box 5799  
Red Hill Rockhampton QLD 4701  
Telephone 07 4923 5700

office@emmaus.qld.edu.au  
www.emmaus.qld.edu.au

**SPORTING MEDICAL CONSENT & PERSONAL DETAILS**  
**PLEASE ONLY COMPLETE THIS SECTION IF YOU ARE**  
**COMPLETING IT FOR THE FIRST TIME OR**  
**UPDATING ANY INFORMATION**

<b>Players Name:</b>		<b>Date of Birth:</b>	
<b>Home Phone:</b>		<b>Mobile:</b>	
<b>Home Address:</b>		<b>Suburb:</b>	
<b>Email:</b>		<b>Postcode:</b>	
<b>Emergency Contact:</b>			
<b>Address:</b>		<b>Suburb:</b>	<b>Postcode:</b>
<b>Telephone:</b>		<b>Mobile:</b>	
<b>Suffers from Asthma:</b>	<b>YES / NO</b>	<b>Asthma Medication:</b>	
<b>Medicare Number:</b>		<b>Private Health Cover:</b>	<b>YES / NO</b>
<b>Health Cover Provider:</b>			
<b>Level of Cover:</b>		<b>Membership No.</b>	
<b>Allergies known:</b>		<b>Prescribed Medications:</b>	
<b>Are you suffering from an injury or condition, which is likely to be aggravated by your/or affect your involvement in sporting activities? (If yes, please give details) Please also include any other relevant medical history.</b>			

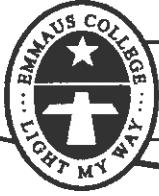
I am aware of the nature of the activity and agree to delegate my authority to the staff and instructors involved.

I accept that the teachers and instructors will take appropriate disciplinary action necessary to ensure the safety, well-being and successful conduct of the students who participate in the activities associated with the sporting event.

In the event of any illness or accident, I authorise the obtaining of such medical assistance as my child may require. I accept all medical treatment, blood transfusions and/or anesthetic risks involved and the responsibility for payment of any expenses thus incurred.

**MEDICAL INSURANCE**

With regard to medical insurance, this is the primary responsibility of the parents. Emmaus College does have basic insurance for all of its students that covers them for some injuries which might occur during school events. However, as this is limited, we recommend the investigation of personal insurance. For further information regarding the College's limited cover, please refer to the Catholic Church Insurances Limited website, [www.ccinsurances.com.au](http://www.ccinsurances.com.au) and access the section on "School Care" or collect information from the College office. Please note you must contact CCI on 1300 655 001 within 35 working days of the incident if you wish to make a claim.



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**MEDIA RELEASE – STUDENT CONSENT FORM**

Consent is sought for the student to be identified (photographed and/or named) in any Catholic Education, Education Queensland and Rockhampton Secondary Schools related publications, including the School Year Book, newsletters, audio-visual presentations and records of achievement. Specific consent will be sought for external marketing and promotional purposes.

Consent is sought for the student to be identified (photographed and/or named) on the school/college or on any Catholic Education, Education Queensland and Rockhampton Secondary Schools related website.

I have read and have no objection to my child’s image and/or name being used for publications as stated in the MEDIA RELEASE contents and conditions.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

I have read and have no objections to my child being identified on related websites as stated in the MEDIA RELEASE contents and conditions.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

This document gives the State and Education Queensland and the Rockhampton Secondary Schools the permission to reproduce portions of sound, video clips or photographs of students taken in the course of their representative sport activities for purposes associated with the promotion of Emmaus College, Education Queensland or the State of Queensland. Permission is also granted to name the student.

This does not mean that you, the student, lose ownership rights over your sound, and/or vision – simply that Emmaus College, Education Queensland has permission to use your sound, and or vision for the purposes mentioned.

1. The prementioned organisations might record sound and/or vision of me whilst I am taking part in representative school sport activities.
2. These organisations understand that I own the intellectual property rights in my sound and my vision, and this Consent Form is not meant to transfer my ownership.
3. I give permission to these organisations to use my sound/vision, and/or my name for:
  - a. The media activity listed above which will assist with Emmaus College resource needs;
  - b. Future media activities which would assist with further Emmaus College school sport activities;
  - c. Promoting and advertising of Emmaus College and its students; and
  - d. Any commercial purpose.

I will not withdraw the permission I have given, and Emmaus College understands that I may choose to give this permission to other people.

4. I understand that by giving this permission, the above said organisations can use my sound/or my vision in any way it chooses, for the purposes described above. It may reproduce them in any form, in whole or in part, and distribute them by any medium including the Internet, CD-rom, or other multi media uses.

5. I understand that I will not be paid by these orgnaisations for giving this permission.

Name of Student:  
\_\_\_\_\_

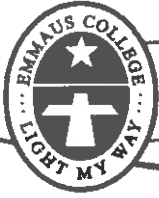
Name of Parent/Guardian:  
\_\_\_\_\_

Signature of Student:  
\_\_\_\_\_

Signature of Parent/Guardian:  
\_\_\_\_\_

Dated:  
\_\_\_\_\_

Dated:  
\_\_\_\_\_



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**SPORTING CODE OF CONDUCT**

Everyone connected with Emmaus, whether they are a parent, supporter, player or coach is reminded that support and cheering of both our own teams and opposing teams should be of the highest order. We should give positive encouragement to our own players and show appreciation for good play by members of opposing sides. We should enable all players to perform to their best. There should be no attempt to put opposing players off their game, but rather, we should appreciate their efforts. Our support should be based on solid principles of respect and encouragement and this is regardless of any perceived poor behaviour by supporters of other teams. Umpires and referees must also be respected.

If you see someone doing the wrong thing, either politely ask them to refrain or ask any Emmaus staff member or Emmaus coaching staff member to do so. We encourage you to advise us of any behaviour you believe is outside the spirit of the game/event.

- follow all directions of team management/officials and show them respect;
- compete by the competition conditions and rules and demonstrate appropriate social behaviour;
- respect the judge's, referee's or umpire's decision;
- control temper and don't display criticism by word or gesture;
- work together to promote good sportsmanship and encourage and support other team members and also the opposition;
- work equally hard for myself and my team as both the team's and my performance will benefit;
- co-operate with my coach and team mates and show respect for my opponents and their skills;
- be friendly to all participants and supporters. Swearing, sledging, intimidation or physical abuse will not be tolerated;
- wear the official team uniform at all times, as directed by team management / officials;
- stay in the designated team area and support other team members during times when I am not competing;
- abstain completely from smoking, drinking of alcoholic beverages or the taking of non-prescribed drugs;
- go to bed at a reasonable hour as this will assist my own and my team's performance.

**BREACH OF THE CODE**

I accept that if, in the opinion of team officials, I am found to be in breach of this code of conduct I may be required to attend a disciplinary meeting with the School Principal, or delegated person, to discuss the incident, which could result in serious consequences. I understand that unacceptable parental behaviour may result in exclusion from attending any further school sporting event.

**Student's Agreement to the Code of Behaviour**

I \_\_\_\_\_ have read and understand the Code of Behaviour and agree to abide by its conditions.

Signed:	Date:
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**Parental Agreement to the Code of Behaviour**

I understand the above and agree to abide by the Code of Behaviour.

Name of Parent/Guardian:	
Name of Parent/Guardian:	
Signed:	Date:
Signed:	Date: