

## Parental/Guardian Release & Media Consent

### Child's Details

Full name: \_\_\_\_\_

Date of Birth (DD/MM/YYYY): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Post Code: \_\_\_\_\_

### Parent/ Guardian Details

Full name: \_\_\_\_\_

Relationship to Child: ☐ Parent ☐ Legal Guardian

Phone number: \_\_\_\_\_

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

### Event Details

Event name: \_\_\_\_\_

Event Location: \_\_\_\_\_

Event Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

### Participation Release

I, the undersigned parent/legal guardian of the above-named child:

**Consent** to my child's participation in the above ADG-sanctioned event.

**Acknowledge** that disc golf involves physical activity and some risk of injury.

**Release** and discharge Australian Disc Golf Inc., its officers, volunteers, and event organisers from any liability, claim, or demand relating to my child's participation, except where caused by gross negligence or unlawful acts.

### Supervision and Approved Adult

I acknowledge that:

- My child must be supervised at all times by myself, my legal co-guardian, or an Approved Adult I nominate.
- If I am not present for any part of the event, the following Approved Adult will supervise my child:

Approved Adult Name: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_ Phone: \_\_\_\_\_

### Media Consent

By allowing my child to participate in this event, **I GIVE permission** for my child's image/video to be captured and published for promotional purposes by ADG and event organisers.

### Parent/ Guardian Declaration

I declare that:

- The information provided is true and correct.
- I have read and understood the ADG Supplementary Safeguarding Children & Young People Policy.
- I will comply with all supervision requirements.

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

Printed Name: \_\_\_\_\_