

PARENTAL ASSISTANCE DECLARATION AND PREFERENCE FORM 2019-2020



IMPORTANT INFORMATION — PLEASE READ CAREFULLY AND COMPLETE THE DECLARATION

Like all Little Athletics Centres, Northern Districts has a policy that requires parents of all athletes to **regularly** assist with the conduct of events at competitions that their children attend. The minimum level of assistance expected is for one representative from each family to assist at Foxglove Oval for approximately three hours **EVERY SECOND SATURDAY** that their children attend. If you are unfamiliar with this policy, please take the time to review it now in our season handbook or website. You are encouraged to ask questions and discuss any aspect of the policy that you do not understand with a committee member.

- I/We understand that by registering our child(ren) with Northern Districts Little Athletics Centre I/we have an obligation to regularly assist the Centre in the running of all competitions in which my/our child(ren) are involved including Centre competitions (at Foxglove Oval) and Little Athletics NSW championship events. YES
NO
- I/We understand that if I/we do not sign on and assist on at least **half** (50%) of the weeks that my/our children attend competitions at Foxglove Oval, that the Centre's committee **may withhold any trophies or awards gained by all registered members of my/our family.** YES
NO
- If I/we become aware of any exceptional circumstances which will prevent my/our family from fulfilling our parental assistance obligations on Saturdays I/we will contact the Centre Secretary to discuss alternative ways to assist the Centre. **(Any arrangements from last season must be renegotiated if circumstances are unchanged.)** YES
NO
- I/We understand that if I/we do not sign on and assist for competitions at Foxglove Oval, or assigned duties at Zone & Region Carnivals, that the Centre's committee **may withdraw entries for future Representative Carnivals.** YES
NO

NAME(S) OF CHILD(REN): _____

Parent/Guardian name	signature	/ / date
Parent/Guardian name	signature	/ / date

I am /We are interested in the following areas:

- TRACK & FIELD ASSISTANTS** Track preference Field preference
(Please tick this option unless you are interested in a specific position or duty below.)
- TRACK & FIELD OFFICIALS** Every week Every second week
- Please circle event(s):*
- | | | | | |
|-----------|-----------|-----------|----------------|---------|
| SPRINTS | HURDLES | 200M/400M | DISTANCE RACES | STARTER |
| LONG JUMP | HIGH JUMP | | SHOT PUT | DISCUS |
- Do you have accreditation from LANSW / Athletics NSW / other ? _____
- Track (Grade) Disciplines(s): _____
- Field (Grade) Event(s): _____
- AGE MANAGER** Preferred age group(s): _____ B / G _____ B / G
- OTHER** Results data entry Canteen BBQ First Aid quals _____
- VACANT COMMITTEE POSITION** see NDLC President for more info

THANK YOU FOR YOUR SUPPORT

And finally, so that we can better manage our advertising expenses, how did you find out about Northern Districts this season?
(Please tick all options that apply.)

- | | | | |
|---|--|--------------------------------------|--|
| <input type="checkbox"/> NDLC website | <input type="checkbox"/> LANSW website | <input type="checkbox"/> NDLC letter | <input type="checkbox"/> LANSW email |
| <input type="checkbox"/> School promotion | | | <input type="checkbox"/> Street banner |
| <input type="checkbox"/> Friend/neighbour | <input type="checkbox"/> Facebook | | <input type="checkbox"/> Foxglove Oval signage |