

Calisthenics Association of WA (Inc.) 2024 AFFILIATION FORM (Competing U18yrs)

Tinies Sub Juniors Juniors Intermediates Seniors
(Please tick relevant section)

TERM 1 & 2 Start: \$75.00 TERM 4 start \$20.00

Financial Membership period 1 January 2024 to 31 December to 2024

FIRST NAME: _____ SURNAME: _____

GENDER: Female Male Non-binary Differently Identify

DATE OF BIRTH: / / YEAR COMMENCED: _____

ADDRESS: _____

SUBURB: _____ POSTCODE: _____

CLUB ATTENDING: _____

EMERGENCY CONTACT: _____ PH NO: _____

For participants under the age of 18, elect a parent/guardian who will be the member of the Association in compliance with our Constitution. The parent/guardian elected will be entitled to vote at our Annual General Meeting or Special General Meetings and may be eligible to be nominated for a position on Board of Management.

NAME OF PARENT/GUARDIAN: _____

E-MAIL: _____

CONTACT PH: _____

Parent/Guardian Consent

By payment of the Association affiliation fee, parents/guardians consent to the following:

- Information provided on this form may be used by the Calisthenics Association of WA (“the Association”) for the administration of the sport of calisthenics and in accordance with the objects of the Association. This information will be held in an Association database at the Association office and may be forwarded to the Australian Calisthenics Federation (“ACF”) for use in the administration of the sport of calisthenics on a national level and in accordance with the objects of the ACF. Members can access their personal information through the Association upon request.
- The member’s name and photograph (but not address) may be recorded and/or published in any form of CAWA and ACF media including video, live streaming, website, social media, newsletters, reports and programs (whether printed or electronic) for the purpose of calisthenics.
- Photos during competition presentations may be taken and published by the audience.
- Video may be recorded of the member whilst training and during Association (or club) performances. Such videos may be used for:
 - family keepsakes by family members or other members.
 - by or for coaching staff to be used for coaching purposes.
 - by or for adjudicators for adjudication purposes.
- Information about calisthenics may be sent to the member from time to time by mail or email.

Authorisation may be retracted at any time; such retraction to be submitted in writing and forwarded to CAWA Administration, via email at info@calisthenicswa.com.au or PO Box 1464, Midland DC WA 6936.

I have read and understand the Member consent.

SIGNATURE: _____ DATE: _____
(Parent / Guardian)

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Dear Parent

CAWA relies totally on the support of parents to operate.

Helpers are needed for the competition season and to work within the theatre during calisthenics events.

Please tick the area in which you can help. CAWA will be in contact with you via your club.

Theatre Management – lighting, sound, stage manager, backstage assistant

Competitions – timing, marshalling, doors and front desk

Kiosk - sales, food preparation

Development and Promotion – of calisthenics to the community

NAME: _____

ADDRESS: _____

PHONE/MOBILE: _____

EMAIL: _____

Thank you for your support and your valuable time that you have indicated you will give.

Board of Management
Calisthenics Association of WA (Inc.)