



Participant Agreement 2013

Your selection to represent Winged Victory in 2013, including but not limited to, the Southern University Games, Australian University Games and Australian University Championships, is conditional upon you signing this agreement and observing its terms.

After reading the document in full, initial the bottom right corner of each page and sign this agreement on page 4 (or have a Parent/Guardian sign if you are aged under 18 years). Return the completed document to Reception at the Sports Centre. You are advised to retain a copy of this agreement for your own records.

This Agreement will commence upon the date of the receipt of this signed agreement by the Sport Development Manager of Melbourne University Sport (MU Sport); and your selection as a member of a team competing in an event sanctioned by MU Sport. This Agreement applies from the time you depart from your home to the city of the event(s), until you return home following the event(s).

This information is collected, stored and destroyed in accordance with the MUS Privacy Policy. A copy of this information is available at www.sports.unimelb.edu.au.

A. Personal Details

First Name:	Surname:
Representing Sport(s):	
Participant Status (please circle);	Athlete Team Manager Coach Other
Student Number (students only):	Date of Birth:
Faculty/School of Study (students only):	
Year of Study (students only):	Expected Year of Completion:
Home Phone:	Mobile Phone:
Email:	
Medicare Number:	

B. Emergency Contact

In case of an emergency, the following person should be contacted

First Name:	Surname:
Relationship to You:	Mobile Phone:
Home Phone:	Work Phone:

C. Medical History

1. Pre-existing Conditions	<i>Please circle if you suffer from any of the following:</i>	
Asthma	Black-outs	Migraines
Heart condition	Dizzy spells	Fits of any type (please list):
Diabetes	Other (please list):	
2. Allergies	<i>Please circle if you are allergic to any of the following:</i>	
Penicillin	Other Medication (please list):	
Foods (please list):	Other (please list):	
3. Tetanus	<i>If known, when was your last immunization?</i>	Year
4. Current Medication	<i>Are you currently taking any forms of medication?</i>	YES / NO
If YES, please state TYPE:		

If Yes, please state DOSAGE:	
5. Major Illness/Injury	<i>Please list major illnesses, injuries and operations in the past one year:</i>
	<i>e.g. broken collarbone (2004)</i>
6. Other	<i>Please indicate any other information relevant to your well-being:</i>
	<i>e.g. special dietary requirements</i>

D. Participant Agreement

As a member of my team in the MU Sport-sanctioned event, I acknowledge my responsibilities as outlined below, as a representative of the University of Melbourne:

1. Personal Obligations
 - 1.1 I agree to behave in a responsible manner and observe the spirit of fair-play and behave accordingly on the sporting arena;
 - 1.2 I agree to conduct myself in a proper manner so as to ensure team harmony and so as not to bring myself, the University of Melbourne or the event organisers into public disrepute or censure;
 - 1.3 I agree to conduct myself so as to perform at the best of my ability at events, and carry out my duties to the team to the best of my ability;
 - 1.4 I agree to observe and comply with reasonable directions of the Team General Manager and persons appointed by him/her;
 - 1.5 I agree to observe and comply with directions of event staff;
 - 1.6 I agree to comply with the statutes and regulations of the University of Melbourne and the event organisers;
 - 1.7 I agree not engage in any unlawful behavior, or harass officials, players or spectators
 - 1.8 I agree to ensure that I only compete if I am eligible under the rules of AUS, and that I will advise MU Sport if there is a change to my circumstances that may prevent my continued participation (AUS events only);
 - 1.9 I agree to wear the official Winged Victory playing uniform while participating in the competition and official Winged Victory travelling uniform when traveling to and from the event.
2. Financial Obligations
 - 2.1 I agree that my selection and participation is subject to the payment of the specified Winged Victory participation fee prior to the event, or as agreed with MU Sport;
 - 2.2 I agree any expense incurred to the University of Melbourne through my own or my team's withdrawal or forfeiture will be the responsibility of the team and may result in a financial commitment by myself;
 - 2.3 I will reimburse any unauthorized expense incurred by me to the University of Melbourne including but not limited to air travel, accommodation and hire vehicles.
3. Disciplinary Obligations
 - 3.1 I acknowledge that the Team General Manager and/or my Team Manager will assess my standard of my behaviour;
 - 3.2 I acknowledge that where the Team General Manager receives a complaint about my behaviour, or believes on other grounds that I may have breached this Agreement, my Team Manager will be asked to investigate the matter and report all information to the Team General Manager;
 - 3.3 I acknowledge that the Team General Manager has the power to:
 - 3.3.1 Terminate my membership of the team;
 - 3.3.2 Require me to leave the event venue and return home;
 - 3.3.3 Exclude me from competition;
 - 3.3.4 Recommend my exclusion from future events endorsed by the University of Melbourne and/or the event organisers; and
 - 3.3.5 Cancel or impound my accreditation.

- 3.4 I acknowledge that in addition, financial penalties may be imposed in respect of any damages I am found to have caused;
- 3.5 I acknowledge that if I am accused of breaching this Agreement, I will have an opportunity to meet with the Team General Manager to discuss the matter;
- 3.6 I acknowledge that the Team General Manager will ensure that all occasions of disciplinary procedures are advised to the Director of MU Sport; and
- 3.7 I acknowledge that breaches of behaviour may also be referred to the University of Melbourne for consideration under the University's disciplinary procedures, which may result in suspension from academic studies.

4. Medical Obligations

- 4.1 I agree to disclose all relevant medical information to Team Management and Medical Staff prior to and during my participation;
- 4.2 I agree that, acting on advice from Winged Victory medical staff, the Team General Manager may direct me not to participate in an event if he/she believes my participation would mean an unacceptable risk of:
- Causing harm, injury or death to myself or other participants in the event;
 - Aggravating an existing injury or illness I may have; or
 - Infecting other Team members or participants in the event.

5. Drug Policy

- 5.1 I agree to comply with all relevant laws regarding the consumption of alcohol;
- 5.2 I agree that I will not participate in events whilst under the influence of alcohol;
- 5.3 I agree that I will not consume alcohol at sports venues, other than in licensed areas;
- 5.4 I agree that if I consume alcohol, I will do it responsibly, and that I will not allow my behaviour to result in a breach of this agreement.
- 5.5 I agree that as required by the event organisers, I will comply with the WADA Anti-Doping Code and my sport's National Sporting Organisation Anti-Doping Policy. I understand that detailed information on these can be obtained on request from MU Sport.
- 5.6 I will not use, attempt to use, have in my possession, attempt to have in my possession, traffic or attempt to traffic a 'drug of dependence' (as each of these words or phrases are defined in the Drugs Poisons and Controlled Substances Act 1981 of the State of Victoria).

6. Media

- 6.1 I agree to make myself available, where possible, to assist with media interviews or photo shoots as approved by MU Sport Team Management;
- 6.2 I agree to MU Sport using, reproducing and disclosing photographs of me (personal information) in its publications, promotional and marketing material and on its website (www.sports.unimelb.edu.au);
- 6.2 I agree that the spokesperson on all team matters will be my Team General Manager.

7. Benefits

- 7.1 A financial subsidy towards the costs of participation in the event, the amount being at the discretion of MU Sport;
- 7.2 Team clothing at the discretion of MU Sport;
- 7.3 Medical, physiotherapy and massage services at the discretion of MU Sport;
- 7.4 Administrative support to permit participation in events, including accreditation;
- 7.5 Insurance as provided under the University of Melbourne's Student Accident Policy – (refer to Clause 8 for more information).

8. Insurance

Team members will be provided with insurance cover under the University of Melbourne's Student Accident Policy, provided that they satisfy one of the following categories:

- Currently enrolled student
- Current club member
- An appointed volunteer official

Full details of the cover and a copy of the Insurance Policy can be obtained upon request from MU Sport. The policy does **not** provide cover for medical expenses incurred in Australia that are rebatable under Medicare, or any subsequent loss of income.

9. Event Package Requirements

I hereby acknowledge and commit to making payment for the SUG/SUC/AUG/AUC/Other package (where applicable) in full by the due dates (please refer to the relevant UNIGAMES Updates or Other information sources for specific details), or as agreed with MU Sport:

Refunds are subject to the terms of the MU Sport Refund Policy.

10. Acknowledgement and Authorisation

10.1 I acknowledge that MU Sport strongly recommends that I take out **Private Health** and other insurance to cover me for medical and like expenses arising out of any injury or illness I may suffer whilst a member of the team and agree that I am solely responsible for all such expenses and any loss of income consequent upon any injury or illness.

10.2 I agree that the University of Melbourne or MU Sport is not responsible for medical and like expenses in Australia or for any loss of income arising out of any injury or illness I may suffer whilst a member of the team and promise not to make any claim or commence any proceedings against the University of Melbourne in respect thereof.

10.3 I **authorise** Winged Victory staff (medical and management – including my Team Manager) to consent, where it is impracticable for them to communicate with my emergency contact, my parents (*if under 18 years*) or myself, for me to receive such medical treatment as may be deemed necessary. I do this with the understanding that Team Melbourne staff will take all reasonable care and responsibility to ensure my safety and well being throughout my participation; and

10.4 I **agree** that I will participate in events at my own risk.

10.5 I agree that I have read and understood the terms and conditions of the MU Sport Refund Policy, and

10.6 I **agree** to observe the terms of this agreement.

Participant's Signature:	Date:
Parent/Guardian's Signature: <i>(If Participant is under 18 years of age)</i>	Date:

Witnessed By

Witness' Name:	
Witness' Signature:	Date:



THE UNIVERSITY OF

MELBOURNE

Office Use

Deposit Received by MUS:	Date:
Balance Received by MUS:	Date: