

2026 Player Registration & Medical Form



Family / Parent / Guardian & Additional Contact Details *(Applies to all children in attached details and medical information pages)*

Contact details provided will be used for emergencies and for club and team communications by Mareeba Junior Rugby League Club Inc, Team Coaches and Managers.

1. Primary Contact

Name: Click or tap here to enter text.	Phone: Click or tap here to enter text.
Email: Click or tap here to enter text.	Relationship to child: Click or tap here to enter text.
<input type="checkbox"/> Use this contact for emergencies	
<input type="checkbox"/> Use this contact for club and team communications	

2. Secondary Contact

Name: Click or tap here to enter text.	Phone: Click or tap here to enter text.
Email: Click or tap here to enter text.	Relationship to child: Click or tap here to enter text.
<input type="checkbox"/> Use this contact for emergencies	
<input type="checkbox"/> Use this contact for club and team communications	

3. Additional Contact *(Optional)*

Name: Click or tap here to enter text.	Phone: Click or tap here to enter text.
Email: Click or tap here to enter text.	Relationship to child: Click or tap here to enter text.
<input type="checkbox"/> Use this contact for emergencies	
<input type="checkbox"/> Use this contact for club and team communications	

4. Declarations and Consents *Apply to all children listed on this form*

<input type="checkbox"/> I understand that participation in Rugby League involves physical activity and inherent risks.
<input type="checkbox"/> I give permission for Mareeba Junior Rugby League Club Inc to obtain medical treatment for my child/children in an emergency, including ambulance transport if required. I understand that any associated costs are my responsibility.
<input type="checkbox"/> I understand that my child/children may not participate in training or matches until registration requirements and fees are completed.
<input type="checkbox"/> I consent to Mareeba Junior Rugby League Club Inc sharing my contact details with my child's appointed Team Coach and Team Manager for team-related communication purposes only.
<input type="checkbox"/> I understand that Strapping is only for injuries on game day for Age Groups 13 – 17 only and I agree that strapping tape will be provided by the parent not the club for ongoing injuries.
<input type="checkbox"/> I understand that in line with Queensland Child Safe Standards, Mareeba Junior Rugby League Club activities operate during scheduled training times only (5:00pm–6:00pm). Parents/guardians remain responsible for their child outside these times, including ensuring prompt collection at the end of training at 6pm.

5. Media Consents

<input type="checkbox"/> YES – I consent to photos and video being taken and used by the Club for club, team and promotional purposes.
<input type="checkbox"/> NO – I do not consent.

6. Code of Conduct Acknowledgement

<input type="checkbox"/> I acknowledge that I have read and understand the Mareeba Junior Rugby League Club Code of Conduct & Behaviour Framework. I understand that compliance applies to volunteers, players, parents/guardians, carers and spectators and is a condition of participation.	
Parent / Guardian Name: Click or tap here to enter text.	Signature:
Date:	



Code of Conduct - Appendix E - Players Checklist

<p>Turning Up & Having a Go</p> <ul style="list-style-type: none"> - Turn up to training and games ready to compete. - Put in effort, even on tough days. - Having a crack matters here. <p><i>What this looks like:</i> You show up, stay involved, and keep going.</p>	<p>Playing Tough but Fair</p> <ul style="list-style-type: none"> - Compete hard and give your best. - Play within the rules. - Tough football does not mean cheap shots, abuse or dirty play. <p><i>What this looks like:</i> Strong, disciplined football that earns respect.</p>
<p>Team Behaviour</p> <ul style="list-style-type: none"> - Treat teammates, opponents and coaches properly. - Follow the rules and accept decisions from referees. - If there’s an issue, captains raise it calmly at appropriate breaks in play. <p><i>What this looks like:</i> You play hard without losing control or blaming others.</p>	<p>Enjoyment & Connection</p> <ul style="list-style-type: none"> - Back your teammates and acknowledge good play from both sides. - Be someone your teammates want beside them. - Enjoy the game and the people you play with. <p><i>What this looks like:</i> You contribute to a positive team environment.</p>
<p>Learning & Response to Coaching</p> <ul style="list-style-type: none"> - Listen to your coach and try to apply feedback. - Own your mistakes and move on. - Mistakes are part of learning — they don’t define you. <p><i>What this looks like:</i> You stay engaged, even when things don’t go your way.</p>	<p>Representing the Club</p> <ul style="list-style-type: none"> - Represent MJRL with pride on and off the field. - Your actions reflect on your team, your club and your community. <p><i>What this looks like:</i> You wear the jersey properly and act accordingly.</p>

Remember: Everyone has off days — effort matters. Support comes first when you are trying. Repeated or serious behaviour issues will be addressed.

Code of Conduct - Appendix F - Parents, Carers and Spectators Checklist

As part of MJRL, parents, carers and spectators are expected to:

- ❖ Support effort, learning and enjoyment — not just results.
- ❖ Support children to attend training and games where possible, and communicate with coaches or team managers about attendance or any health or wellbeing concerns that may affect participation.
- ❖ Encourage all players and acknowledge good play from both teams.
- ❖ Treat coaches, referees, officials and volunteers appropriately.
- ❖ Let coaches coach and players play.
- ❖ Remain off the field of play during training and games, unless invited or required in an official role.
- ❖ Follow club rules around alcohol, smoking and vaping at all club activities.
- ❖ Raise concerns through club communication pathways, not from the sideline, in group chats or online.
- ❖ Help where possible — MJRL is a volunteer-run club and relies on community support.

Remember:

Passion is welcome. Disrespect is not. Your behaviour directly shapes how kids experience the game.

Parent / Guardian Name: Click or tap here to enter text. Date:	Signature:
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Player Details and Medical Information (complete one page per player you are registering)

Player – Medical Information If YES to any item, provide details in the Management column or attach additional information			
Child Full Name: Click or tap here to enter text.	Date of Birth: Click or tap here to enter text.		
Age Group (Under): Click or tap here to enter text.	Shirt Size: Click or tap here to enter text.		
Medicare Number: Click or tap here to enter text.	Gender: Click or tap here to enter text.		
Does your child suffer from:			
Condition	Yes/No		Management
Diabetes	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Asthma	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Epilepsy	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Bronchitis	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Allergies (please list)	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Signs or symptoms during training or games:			
Symptoms	Yes/No		Details
Undue Shortness of Breath	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Chest Pain	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Light-Headedness, Dizziness or Fainting	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Becomes tired / fatigued easily	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Allergies (please list)	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Regular or current medication	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Physical condition limiting activity	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Concussion in the past three (3) years	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
<input type="checkbox"/> I declare this to be a true statement of my child's health at the date below.			
<input type="checkbox"/> I will inform the Club First Aid Officer of any relevant medical issue that arises during the season.			
<input type="checkbox"/> I confirm that I have legal responsibility for the child named above and that I am entitled to give this consent			
<input type="checkbox"/> I have registered the child under their legal name and provided proof of identity documents (new players)			
<input type="checkbox"/> I confirm that the declarations, consents and acknowledgements signed on Page 1 apply to the child named on this page.			
Parent / Guardian Name: Click or tap here to enter text. Date:	Signature:		

CLUB ADMIN USE ONLY

Date	Amount	Voucher No	Eftpos	Cash	Receipt No	Committee Signature
Shirt Size	Training Shirt Collected		Club Shirt Collected		Collected By	