



Fresh Meat New Joiner & Waiver Form

Welcome to the Fresh Meat programme. You've got an amazing time ahead of you!

About you		
First name	Surname	Derby name – if you already have one
Home phone:	Mobile phone:	Address:
Email address:		
I am here because <input type="checkbox"/> I want to skate <input type="checkbox"/> I want to ref		Gender:
A bit about your previous skating experience		
How much skating did you do before today?	<input type="checkbox"/> None, never – can't wait to start <input type="checkbox"/> When I was little I did a bit / I recently started <input type="checkbox"/> A lot in the past – just a bit rusty <input type="checkbox"/> Totally comfortable on skates thank you	
What do you know about roller derby?	<input type="checkbox"/> Nothing – I got told to turn up by someone <input type="checkbox"/> I read about it – looks fun <input type="checkbox"/> I came to a bout once or twice <input type="checkbox"/> Addicted just not playing yet <input type="checkbox"/> Making my comeback after time off	
How physically active are you? (Please be honest 😊 some of us hated sport before derby!)	<input type="checkbox"/> Love sport – and get as much as I can – play sports, got to the gym, several times a week <input type="checkbox"/> I aim for 1 or 2 times a week but it comes and goes – life happens <input type="checkbox"/> I do some, well sort of, sometimes...I try <input type="checkbox"/> None – that's why I am here! If you do sport – what? _____	
The marketing bit		
How did you first hear about this Fresh Meat intake?	<input type="checkbox"/> Facebook <input type="checkbox"/> Friends/family <input type="checkbox"/> Flyer <input type="checkbox"/> other _____	
Do you want to play competitively or just for fun?	<input type="checkbox"/> I want to make the travel team and compete with DRG <input type="checkbox"/> I only want to play for fun – I'm not competitive <input type="checkbox"/> I'm here to become a ref <input type="checkbox"/> Not sure yet – it's too soon to say	
What would you like to know about DRG, Derby or life after fresh meat that you haven't found out yet?		

Thank you! Now the legal bit



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Medical & emergency - in strictest confidence for medical personnel in case of emergency	
Next of Kin Name:	GP Surgery:
Phone:	
Relationship to you:	
Known or suspected allergies:	
Disabilities or medical conditions/major illness in past 12 months:	
Are you currently taking any regular medication?	
Have you received surgery or treatment for a confirmed Back, Neck or Head Injury/ Condition?	
Have you ever been advised not to undertake strenuous activity due to any medical condition?	

I confirm that the medical information provided is correct and in full and that I will undertake to inform DRG Management of any changes to my health status. **I certify that I have no medical condition that would cause participation in roller derby to be potentially hazardous to my health.** I further authorize medical treatment for myself if the need arises, and agree to undertake any reasonable measures to protect my health as instructed by the Dorset Roller Girls.

I agree to assume all risks incidental to participation in roller derby. I understand that roller derby can be an inherently dangerous sport and I choose to voluntarily participate at my own risk. I am aware that the risks of roller derby include personal injury, death and disability. I am aware the hazards include, but are not limited to, falling, colliding with other skaters, officiators, media personnel and spectators. I understand and agree that I am voluntarily assuming all risks of participating in roller derby.

I indemnify the Dorset Roller Girls from any and all liability, howsoever arising, for the injuries to any third party, and the loss of or damage to any money or property, both direct and consequential, resulting from my participation in any league related activity. I hereby waive all rights to take legal action against the Dorset Roller Girls for any and all matters, with the sole exception of claims for injury or death arising directly as a result of negligence on the part of the Dorset Roller Girls, as far as is permitted by law.

I hereby unconditionally assign to the Dorset Roller Girls and authorised parties all right, title and interest I may have in any and all audio, audio visual and/or photographic recording of me in any DRG events and grant the DRG permission to use, display, license, sell and publish or otherwise deal with the audio, audio visual and/or photographic recording of me, including for the purpose of advertising, promotion or otherwise. I further agree that any such recording(s) will remain the property of Dorset Roller Girls. I certify I am 18 years of age or older and the information set forth above is true and complete to the best of my knowledge.

Name (print clearly)

Signature

Date