



WIERDA  
RHYTHMIC GYMNASTICS

APPLICATION FORM  
SECTION 1

ALL INFORMATION IS KEPT WITH STRICT ADHERENCE TO THE POPI ACT (2021)

PARTICULARS OF CHILD/CHILDREN

CHILD

CHILD

NAME & SURNAME

DATE OF BIRTH

ID OR PASSPORT NUMBER

SCHOOL

LEARNING PROBLEMS,  
ILLNESS, ETC.

PARTICULARS OF LEGAL GUARDIANS

GUARDIAN 1

GUARDIAN 2

NAME & SURNAME

EMAIL ADDRESS

TEL (W)

TEL (C)

HOME ADDRESS

CODE

CODE

GUARDIAN OR AU PAIR

NAME

TEL(C)

SECTION 2



PERSON RESPONSIBLE FOR ACCOUNT

EMAIL ADDRESS

# WIERDA

RHYTHMIC GYMNASTICS

## SECTION 3

PARENT/GUARDIAN  
OF

I,

DO HEREBY INDEMNIFY WIERDA RHYTHMIC, THEIR COACHES, THE PROVINCIAL AND NATIONAL GYMNASTICS FEDERATIONS OR ANY TRAINING OR COMPETITION VENUE AGAINST ANY LIABILITY WHATSOEVER, DIRECTLY OR INDIRECTLY INCURRED DURING THE CHILD'S PARTICIPATION IN TRAINING, COMPETITION, FUNCTIONS, OR ANY RELEVANT MEETING OR TRANSPORT IN CONNECTION HEREWITH. I CERTIFY THAT THE INFORMATION SUBMITTED ABOVE IS CORRECT AND I AGREE TO ABIDE BY THE RULES AND REGULATIONS OF THE CLUB.

SIGNED

DATE