



# OONAH Family Activity Registration Form

ABORIGINAL HEALTH AND COMMUNITY SERVICES

OONAH Health & Community Services Aboriginal Corporation is a Child Safe Organisation. The information provided in this form will primarily be used so OONAH can make sure your child is well supported and we know who to contact should any issues occur. Your information will be stored in accordance with our Privacy Policy.

This event is for Aboriginal and/or Torres Strait Islander identified families, living in OONAH's Catchment area, and are engaged in our services.

FULL NAME OF PARENT/CARER:

PHONE NUMBER: EMAIL:

ADDRESS:

DATE OF BIRTH: MOB/CLAN:

EMERGENCY CONTACT NAME:

PHONE NUMBER: RELATIONSHIP:

TICK THIS BOX IF YOU WOULD LIKE TO BE ON OUR MAILING LIST FOR OONAH UPDATES.

TICK THIS BOX IF YOU HAVE ACCESSED OONAH SERVICES BEFORE?

**REMINDER:**

We ask that if your child, or any of your guests are unwell, that you please ensure they do not attend this Event. This is to help reduce the risk of spreading any viruses (such as COVID-19) or bugs to the other participants.

We appreciate your cooperation and understanding.

**Please note: Emergency Contact must be different from the person completing this form, so we can ensure the appropriate people are contacted if you are injured.**

**MULTI-MEDIA CONSENT:**

I give multi-media consent including photo/video of myself and my child/ren to be used by OONAH for promotional purposes.  
(eg. OONAH Newsletter, Annual Report, Promotional Flyers/Brochures, website).

YES  NO

SIGN: \_\_\_\_\_

DATE: \_\_\_\_\_

ALL GUESTS (FULL NAMES)	AGE/ D.O.B	DIETARIES / ALLERGIES
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____

TOTAL NUMBER OF PEOPLE ATTENDING (INCLUDING CHILDREN)

NAME OF ACTIVITY: Surf's Up - Family Day Monday 20th JAN 2025

RSVP by 9th JAN 2025, and return to: [events@oonah.org.au](mailto:events@oonah.org.au)