

SSAA Tilterweira Youth Camp
22nd September – 30th September 2012
Application & Consent Form

I, (Name), as a Parent / Legal Guardian of

(Attendee name)

of (Physical address),

hereby give my consent for him/her to attend the Tilterweira Youth Camp for young hunters to be held at Tilterweira Station, Wanaaring, NSW from the 22nd Sept to 30th Sept 2012 (weather permitting).

I agree to delegate my authority to Robert Broderick – Youth Camp Coordinator, SSAA (NSW) Inc., and other supervising staff during the length of the camp.

Such staff may take whatever disciplinary action they deem necessary to ensure the safety, well-being and good conduct of the attendees, as a group or individually, at the above-mentioned camp. If my child's behaviour is not of an acceptable nature I accept that I will be asked to remove him/her at my own expense and that there will be no correspondence or discussion entered into.

I provide the following information to assist with management, catering and medical arrangements and authorise the staff to obtain such medical assistance as they deem necessary. I furthermore agree to pay all medical expenses incurred on behalf of the above named attendee. I also understand that if I have not fully disclosed information relating to medical, mental or psychological condition/s that my child has, that this may result in my child being removed from the camp at my expense and that there will be no correspondence or discussion entered into.

This camp aims to introduce young hunters to ethical hunting under experienced supervision. As such, they will be expected to fully participate in the harvesting, preparation and consumption of a game animal such as feral goat. Consequently a minor's permit for Category A & B firearms is mandatory, as is current SSAA membership for insurance purposes.

I, as parent / guardian, hereby give permission for to view M rated movies if they are shown. I also agree to release all copyright ownership of the any photographs taken during the camp.

I understand that the photographs may be used for internal and external use by the SSAA and its affiliates in perpetuity and that magazine and newspaper articles featuring my child may be published. Photographs remain the property of the SSAA and may be colour corrected or digitally altered by the SSAA where deemed appropriate.

Signature: / / 2012

Emergency Contact Details:

Contact name: Relationship:

Phone: Mobile:

Alternate contact: Relationship:

Phone: Mobile:

Medical Profile:

Name of Attendee:

Date of Birth:// 19.....

1. Heart problems? YES / NO:

2. Respiratory problems? YES / NO

3. Recent serious illness / operation? YES / NO
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4. Allergies or drug reactions? (e.g. penicillin allergy) YES / NO
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5. Date of last TETANUS injection?//

6. At times does your child require extra attention (eg. teaching or social situations)? YES / NO
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7. Has your child been diagnosed with A.D.H.D. or A.D.D.? YES / NO
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8. Has your child been diagnosed with diabetes? YES / NO
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9. List any prescription medication required during the trip
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10. Ambulance subscriber? YES / NO

11. Medicare number :

12. Medical benefits (insurance) number?

Other Health Information?

Parent / Guardian Name:

Signature:

Date:// 2012

Shooting Profile:

Minors Firearms Permit # :

Attendees SSAA Membership # :

Do you wish to supply a hunting rifle (minimum calibre .243): YES / NO

Type of rifle, serial # and calibre:

Do you wish to supply a .22 rimfire rifle for target shooting: YES / NO

Type of rifle, serial #:

Please note that in most cases the firearms supplied are the personal property of camp supervisors. It is a condition of bringing personal firearms is that they be shared with other participants of the camp. All care, but no responsibility, will be taken with the rifles condition.

Please indicate previous shooting/hunting experience (nb. experience is not a pre-requisite)

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Comments: (anything else we need to know to make sure this camp addresses your child's needs)

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Signature: / / 2012

PLEASE POST COMPLETED FORM TO:

Tilterweira Youth Camp

Robert Broderick

SSAA (NSW) Inc.

PO Box 1001

ST MARYS NSW 1790

Closing Date: Tuesday 31st Aug 2012