

YWCA Canberra Youth Programs Autumn 2023

School Holiday Program excursion permission forms



YWCA Canberra Youth Programs is providing a free school holiday program to young people aged 10 – 25 years old. This is an ACT Government funded program to service vulnerable young people in the community. As such, participants will be triaged based on a needs assessment which will be governed by best practice policy. Transportation for all excursions will be with the Snow Foundation Community Bus and will be leaving from **YWCA Canberra Mura Lanyon Youth and Community Centre**, 22 Sidney Nolan Street, Conder.

These are the available excursions:

- Monday | 15 April | 10.30am – 3.00pm | **National Zoo and Aquarium**
- Tuesday | 16 April | 10.30am – 3.00pm | **Limelight Cinema**
- Wednesday | 17 April | 10.30am – 1.30pm | **Zone Bowling**
- Thursday | 18 April | 9.30am – 1.00pm | **Bounce Trampoline Park**
- Thursday | 18 April | 2.30pm – 5.00pm | **Kooky Olympics**
- Friday | 19 April 9.30am – 2.00pm | **Miniature Golf**
- Friday | 19 April 3.00pm – 6.00pm | **Sunset Festival**
- Monday | 22 April | 1.00pm – 4.30pm | **Black Mountain – On Country Tour**
- Wednesday | 24 April | 1.00pm – 4.30pm | **iPlay**
- Friday | 26 April | 1.00pm – 4.30pm | **Bouldering**

What to bring:

- Water bottle
- Enclosed shoes
- Backpack
- Money to spend

What not to bring:

- No alcohol, drugs, cigarettes/vapes, or dangerous belongings. Any valuables or anything you don't want to lose (YWCA Canberra holds no responsibility for the loss of any possessions).

Staff Details:

- | | |
|---|--------------|
| • Clubhouse Coordinator (driver/first aider): Annie Rowley | 0400 300 781 |
| • Youth Engagement Officer (driver/first aider): Andrijana Sarcevic | 0438 025 703 |
| • Manager of MLYCC: Regan Morris | 0417 459 297 |
| • MLYCC | 6185 2090 |

Keep this page for your records, and complete all the following pages and return to:

- YWCA Youth Engagement Team, youth@ywca-canberra.org.au
- Mura Lanyon Youth and Community Centre, 22 Sidney Nolan St, Conder

Tick/initial the one/s you would like to attend. Please note, prompt return of the permission note does not immediately qualify a position on excursion/s. Participants will be triaged based on individual needs and other determining factors.

Monday 15 April | National Zoo and Aquarium

Initials: _____ Date: _____
Put on waitlist: Yes No

Wednesday 17 April | Zone Bowling

Initials: _____ Date: _____
Put on waitlist: Yes No

Thursday 18 April | Kooky Olympics

Initials: _____ Date: _____
Put on waitlist: Yes No

Friday 19 April | Sunset Festival

Initials: _____ Date: _____
Put on waitlist: Yes No

Wednesday 24 April | iPlay

Initials: _____ Date: _____
Put on waitlist: Yes No

Tuesday 16 April | Limelight Cinema

Initials: _____ Date: _____
Put on waitlist: Yes No

Thursday 18 April | Bounce Trampoline Park

Initials: _____ Date: _____
Put on waitlist: Yes No

Friday 19 April | Miniature Golf

Initials: _____ Date: _____
Put on waitlist: Yes No

Monday 22 April | Black Mountain - On Country Tour

Initials: _____ Date: _____
Put on waitlist: Yes No

Friday 26 April | Bouldering

Initials: _____ Date: _____
Put on waitlist: Yes No

Please note: there are no guarantees that your child/children will be able to participate in all excursions as we want to ensure access to as many young people as possible.

Young person's details:

Full name:

Mobile number (if they have one):

Date of birth:

Emergency contact details:

Parent/Guardian's full name and relationship:

Contact numbers:
(H): _____ (M): _____

Email:

Gender:

Secondary emergency contact's full name:

Pronouns (she/her, he/him, they/them):

Relationship (*i.e. dad, aunt, family friend etc*)

Contact numbers:

Does the young person identify as:

- Aboriginal
- Torres Strait Islander
- Culturally and Linguistically Diverse
- Low Income/Health Care Card
- LGBTQI+

- Having a disability (*if yes, please specify*)

- Allergies (*if yes, please specify*)

- Medical conditions(*if yes, please specify*)

Do they have an allergy and/or medication action plan? Yes No

Please outline any information required in relation to this in the space provided below:

Are there any cultural/religious/dietary/medical/gender/other requirements that YWCA Canberra need to know?

Has the young person attended our School Holiday Program in the past?

Yes No

If **yes**, please specify below:

- | | |
|-------------------------|---------------------------|
| • In the past 3 months | • Within the last 2 years |
| • In the past 6 months | • Within the last 3 years |
| • In the last 12 months | • Within the last 5 years |

YWCA Canberra Clubhouse collects personal information to inform statistics for reporting purposes and so staff can better support the safety and wellbeing of its members. For guidance on the personal information, we collect and how we will handle your information, please contact the Clubhouse Coordinator or see the YWCA Canberra full Privacy Policy on our website (<https://ywca-canberra.org.au/wp-content/uploads/2018/12/OP2.11-Privacy-and-confidentiality-policy.pdf>). You can also request a copy from one of our Privacy Officers at quality@ywca-canberra.org.au.

Excursion permission form

I understand that although staff will take every reasonable precaution to ensure the safety of participants, all physical activities in this program carry the risk of personal injury. I acknowledge that there are inherent risks of personal injury involved in YWCA Canberra activities, and I agree that I/my child participates in activities at my own/ their own risk.

I give YWCA Canberra staff permission to administer first aid to me/my child in the event of an emergency. I agree that in case of emergency, and emergency contacts cannot be reached, I give permission for medical and transport arrangements to be made on my/my child's behalf and I will incur the cost of transportation to a hospital/emergency service and for any associated costs.

I agree that always I will act in a responsible manner, and should I fail to meet expected standards of behaviour, I/my child may be required to cease the activity and/or be required to leave the activity (at my own expense if transport is required).

I acknowledge that should I/my child choose to leave the program for any reason, then YWCA Canberra staff will not be held responsible, but will inform one of the persons listed above (if the young person is under 18 years of age). At all times, I acknowledge my/my child's responsibility in practicing sun-smart practices.

I have read the above information and I give permission for my child/dependant, (participant's full name) _____, to attend the YWCA Canberra Youth Programs Autumn 2024 School Holiday Program excursion/s.

Participant Signature:

Date:

Parent/Guardian Signature

(If participant under 18 years of age):

Date:

Photography permission form

I _____ (participant's name) provide consent for YWCA Canberra to record my image (photograph or video footage) for promotional purposes. I understand my image may be used in mediums including publications and promotional material, and broadcast, print and electronic/social media.

I acknowledge that my image will be used without any personal compensation or remuneration. I agree to forgo any rights to my image including moral rights and copyright.

YWCA Canberra agrees not to use your image in a manner that may be deemed adverse or defamatory. The image will remain the property of YWCA Canberra and any personal details regarding this image will be kept confidentially and will not be used for any purpose other than related to your image.

You should understand that any image which is published online can be copied and redistributed without the knowledge of the person that uploaded it. Once published, we may not be able to retrieve or delete images if consent is withdrawn after publishing.

I agree my images can:

be used to promote YWCA Canberra Youth Programs Only

be used for ongoing future use (general ongoing use related to the role and function of YWCA Canberra, including external agencies)

include my name with the image

You can withdraw your consent at any time by contacting YWCA Canberra

Participant Signature:

Date:

Parent/Guardian Signature:

Date: