



Snow Venture 2008

July 11–20 2008

www.venturers.sa.scouts.com.au

snowventure_sa@yahoo.com.au

MAILING ADDRESS:

Snow Venture
c/o Scouts Australia SA Branch
211 Glen Osmond Road
Frewville
SA 5063



Participant Application

Fee

The Fee for the Snow Venture 2008 is outlined below. The deposit together with the attached application should be returned to the address listed at the top of this page to secure your place with the Contingent.

Fee Type	Fee
Participant – Deposit (due 21 March)	\$300
Participant – Final Payment (due mid June)	\$300
TOTAL	\$600

Time Line

Return your \$300 deposit and application form by the closing date of March 21 2008.
All cheques/money orders are to be made payable to "Scouts Australia SA Snow Venture".

Eligibility

Have experience hiking and carrying a back pack as Snow Venture is a physically challenging Activity. NOTE: skiing experience is not required for Snow Venture.
Be competent in the Outdoor Skills required by the Venturing Skills Award and have achieved this award.
Have approval from your Venturer Leader to confirm the eligibility criteria.
Be over 15, but under 18 years of age on the first day of Snow Venture (July 11, 2008).
Check the Venturing Skills criteria at www.venturers.sa.scouts.com.au/award/vskills.htm

How To Apply

Complete all sections of this application form. Those forms received incomplete will be rejected.
Return together with deposit to the address as indicated at the top of this page.
Applicants intending to use Snow Venture towards their Queen's Scout, Queen's Guide or Duke of Edinburgh Award, are to attach their notification of intentions (Outdoor 1, Pursuits 1) to this application. NOTE: Applicants should thoroughly prepare their intent before applying.
There are limited vacancies for Snow Venture; you will be notified if your application is successful or not. If accepted, you will receive an information pack in April with more detail about the trip.

Refund Policy

Refunds may be applied for in writing to your Winter Party Leader.
Please contact your Winter Party Leader as soon as you discover you may not be able to go. There may be a waiting list so substitution is not permitted.
Withdrawals received more than 1 month prior to the winter party will receive a 90% refund.
Withdrawals received less than 1 month prior to the winter party will incur a \$200 penalty.
In the event of failure to attend the commencement of your winter party or withdrawal during your winter party because of evacuation due to illness or injury, there will be no refund available.

Participant Application Form – SA Snow Venture 2008

Please complete all sections to enable information to be accurately entered into our database.

PERSONAL DETAILS

SURNAME		GIVEN NAMES	
PREFERRED NAME	GENDER M / F	DATE OF BIRTH	
ADDRESS & SUBURB		POSTCODE	
CONTACT PHONE NUMBER		EMAIL	
SCOUT GROUP		UNIT	

EXPERIENCE

Please indicate your skiing experience:

<input type="checkbox"/>	No experience	<input type="checkbox"/>	Alpine Rover Crew Member
<input type="checkbox"/>	Have skied before	<input type="checkbox"/>	Bogong Rover Crew Member
<input type="checkbox"/>	Alpine Venturer Unit Member		

SCOUT MEMBERSHIP

Please indicate your Scouting Membership status

<input type="checkbox"/>	Current Youth Member	<input type="checkbox"/>	Current Adult Member
<input type="text"/>	Membership Number		

If over 18, do you have an appointment with Scouts Australia? YES / NO

If YES, Appointment held: _____

If NO, have you completed an Adult Helper application and police check? YES / NO

SKI HIRE DETAILS

Please make the following measurements as accurate as possible. They will be used as a guide when booking skis, stocks and boots.

<input type="text"/>	Height (cms)	<input type="text"/>	Shoe Size (please specify UK or US)
<input type="text"/>	Weight (kgs)		

CONTACT DETAILS FOR PARENT/GUARDIAN / EMERGENCY CONTACT

Is there any custody issues of which we should be aware? YES / NO

Please indicate at least one Emergency Contact from below

	PARENT 1 / CONTACT 1	PARENT 2 / CONTACT 2
NAME		
ADDRESS		
CONTACT PHONE		
MOBILE PHONE		
EMAIL		

HEALTH AND WELFARE

Does the applicant have any illness, condition or disability? YES / NO

Does the applicant wear a Medic alert bracelet or medallion? YES / NO

Please tick:

<input type="checkbox"/>	ADD / ADHD	<input type="checkbox"/>	Autism / Asperger's	<input type="checkbox"/>	Intellectual Disability
<input type="checkbox"/>	Allergy - Drug	<input type="checkbox"/>	Bed Wetting	<input type="checkbox"/>	Migraine
<input type="checkbox"/>	Allergy - Food	<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	Physical Disability
<input type="checkbox"/>	Allergy - Insect	<input type="checkbox"/>	Epilepsy	<input type="checkbox"/>	Other
<input type="checkbox"/>	Asthma	<input type="checkbox"/>	Heart Condition	<input type="checkbox"/>	

Please provide details of medical conditions on a separate sheet if required. If confidential attach in a sealed envelope.

All participants will need to provide a current health statement at the start of the winter party. This statement will be provided to you at the compulsory information session closer to the trip.

DIETARY REQUIREMENTS

Does the applicant have any special dietary requirements? (For health, religious or cultural reasons only)

<input type="checkbox"/>	Vegetarian	<input type="checkbox"/>	Vegan	<input type="checkbox"/>	Halal
<input type="checkbox"/>	Kosher	<input type="checkbox"/>	Lactose / Dairy Free	<input type="checkbox"/>	Gluten Free
<input type="checkbox"/>	Diabetic	<input type="checkbox"/> Other (please specify):			

MEDICAL INSURANCE INFORMATION

Medicare Number:	Ambulance Fund:
Private Health Fund:	Health Fund Membership Number:

Will the applicant be requiring any medication during Snow Venture? YES / NO

Medication	Dose/Frequency	Illness/Condition

Tetanus Immunisation Date: _____

AGREEMENTS AND AUTHORITIES

Medical

I agree not to make a claim against Scouts Australia (SA Branch) beyond the level of insurance provided by their policies (see explanation below). I authorise any member or other official representative of Scouts Australia (SA Branch) to obtain any medical or dental attention or treatment, or ambulance assistance, considered necessary (or expedient) for the applicant. I agree to reimburse Scouts Australia (SA Branch) for any expenses incurred as a result which are not covered by the Association's insurance policies.

Explanation of Scout Association Insurance

Scouts Australia (SA Branch) maintains insurance policies designed to cover Youth Members during Scouting service. For further information you should consult with your Group Leader or relevant Commissioner to ascertain the exact level of cover of these policies.

Consent to Use of Image

I consent to photographic / video images of me / my child being taken at Scout activities and being used for promotional purposes by and for Scouts.

Privacy Policy

Scouts Australia (SA Branch) has always respected the privacy of its members and customers and understands the importance you place on the protection of person information in its care. Scouts Australia (SA Branch) has a Privacy Policy which conforms with current Commonwealth legislation and copies of this are available from us on request, or from our website. From time to time we may contact you to offer you products or services.

APPLICANT'S STATEMENT

I wish to attend Snow Venture 2008 at the Bogong Rover Chalet in Victoria. I understand the Scout Promise and Law and agree to abide by the policy and rules of Scouts Australia (SA Branch). I understand that breach of the policy and rules will result in myself returning home from the event at my own expense with no refund.

Signature of Applicant: _____ Date/...../.....

APPROVALS (if applicant under 18 years of age)

Parent / Guardian: _____ Date/...../.....

This Venturer is a fit and proper person to attend Snow Venture, has achieved the Venturing Skills Award, and has experience hiking carrying a back pack.

Venturer Scout Leader: _____ Date/...../.....