



BOGONG ROVER CHALET 2009 WINTER PARTY APPLICATION



Mr/Mrs/Ms/Miss First Name Surname

Address

Suburb State Postcode..... Date of Birth

Tel.No. Hm (.....) Wk (.....) Mobile

Email

Occupation/ Field of Study

Other Skills/Service/Contacts You have which may help the Chalet

.....

Medical/First Aid Training (inc. expiry date)

MEMBERSHIP DETAILS

Please provide all details, both Youth and Leader, past and present. Current Youth registration details are required for Rover prices. Current Leader registration details are required for Leader prices.

REGISTRATION DETAILS

Membership Status:
 Current Former Non-Member
 Youth Member Leader Fellowship Member

Membership No. (Ask your Group Leader)

Group Code (Ask your Group Leader)

Section Venturer Squire Rover
 Ranger Guide Ranger Other

Crew/Unit

Group

District

Region

Branch.....

Other Relevant Memberships (Walking Clubs etc)

WINTER PARTY DATES (please tick)

Note: These weeks are Saturday - Saturday and will not to be broken up

<input type="checkbox"/>	Week 1 Vic Snow Venture	June 27 – July 4
<input type="checkbox"/>	Week 2 Bogong Ski Week	July 4 - July 11
<input type="checkbox"/>	Week 3 SA Snow Venture	July 11 - July 18
<input type="checkbox"/>	Week 4 Booked Out!	July 18 - July 25
<input type="checkbox"/>	Week 5 Bogong Ski Week	July 25 – Aug 1
<input type="checkbox"/>	Week 6 Bogong Ski Week	Aug 1 - Aug 8
<input type="checkbox"/>	Week 7 Bogong Ski Week	Aug 8 - Aug 15
<input type="checkbox"/>	Week 8 Bogong Ski Week	Aug 15– Aug 22
<input type="checkbox"/>	Week 9 Bogong Ski Week	Aug 22 - Aug 29
<input type="checkbox"/>	Week 10a Half Ski Week	Aug 29 – Sept 2
<input type="checkbox"/>	Week 10b Half Ski Week	Sept 2 – Sept 5
<input type="checkbox"/>	Week 11 Bogong Ski Week	Sept 5 – Sept 12
<input type="checkbox"/>	Week 12 Bogong Ski Week	Sept 12 - Sept 19
<input type="checkbox"/>	Week 13 Vic Snow Venture	Sept 19 Sept 26

Anyone wishing to attend the Snow Venture's must use the relevant Snow Venture booking form available from our website

To assist us with further promotions, could you indicate where you received this application form from?

Rover Office	Crew mail-out	
From another Rover	AGM	
Bogong Bulletin	Promotion Night	
Bookings Officer	Region Rep/Meeting	
Website/Internet	Chalet	
Other		

EXPERIENCE

Alpine Venturer Unit Member

Alpine Rover Crew Member

Bogong Rover Crew Member

Baw Baw Rover Crew Member

Vic. Branch Ski Touring Team

Nobs Training Year.....

Other skiing experience:.....

Working Bee/s attended in 2008/2009

PAYMENT (full payment with application to be forwarded to Bookings Officer)

Application		Before 1 st May	After 1st May
Rover (18-26 years)	1 Full Wk	\$280	\$330
	2 Consecutive Wks	\$490	\$600
	Half Week*	\$165	\$190
Other Scouting/Guiding Movement	1 Full Wk	\$315	\$355
	2 Consecutive Wks	\$570	\$650
	Half Week*	\$180	\$200
Non-Movement Members	1 Full Wk	\$380	\$410
	2 Consecutive Wks	\$710	\$760
	Half Week*	\$215	\$230
TOTAL PRICE		\$	\$

*Half Week only available for week 10a and 10b
 No other week will be split

Enclose cheque payable to "Bogong Rover Chalet" for the total amount.
 Return to: **Bogong Bookings Officer, PO Box 5253, Pinewood Vic, 3149**

MEDICAL QUESTIONS

Do you suffer from any of the following? If yes, please provide details including medication, seriousness, etc.

Condition	No	Yes	Detail	Condition	No	Yes	Detail
Physical/Mental disability	<input type="checkbox"/>	<input type="checkbox"/>	Asthma	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	Heart Condition	<input type="checkbox"/>	<input type="checkbox"/>
Infectious disease	<input type="checkbox"/>	<input type="checkbox"/>	Pregnancy	<input type="checkbox"/>	<input type="checkbox"/>
Drug Allergy	<input type="checkbox"/>	<input type="checkbox"/>	Food Allergy	<input type="checkbox"/>	<input type="checkbox"/>
Insect Allergy	<input type="checkbox"/>	<input type="checkbox"/>				

Other:

Dietary requirements that should be known.....

Year of last Tetanus injection

Do you require prescription drugs? If yes, explain.....

Medicare No: Do you have Health Insurance? No Yes

Are you a member of the Ambulance Service? No Yes

EMERGENCY CONTACT DURING WINTER PARTY

Mr/Mrs/Ms/Miss First Name..... Surname

Address

Suburb State..... Postcode

Tel.No. Hm (....)..... Wk (....)..... Mobile

All Participants will need to provide a current health statements at the start of the winter party, this will be sent with your acceptance letter, or can be downloaded from www.bogongroverchalet.org.au

PRIVACY NOTICE

Upon joining Scouts Australia, Victorian Branch ("the Branch"), you agreed to us collecting personal and sensitive data for the purposes disclosed in our Privacy Policy. In the case of a youth member, you acknowledged a similar understanding and agreement in your capacity as the Parent or Guardian of that member. The Branch will not use your personal and sensitive information for any reason that you would not reasonably expect it to be used. You have certain legislated rights of access to the personal and sensitive information being held in respect of you or your child and you may exercise those rights of access by contacting the Branch Privacy Officer on (03) 8543.9800. You can also contact us by email at: privacy.officer@vicscouts.asn.au The Branch Privacy Policy may be viewed on our website at www.vicscouts.org.au I acknowledge that I have read this Privacy Notice and I hereby reaffirm my understanding of the Branch Privacy Policy and my continuing agreement to the collection of personal and sensitive data for the purposes disclosed in that Policy.

INSURANCE NOTE

The chalet only provides minimal personal property insurance. Participants to winter parties should ensure that they have the appropriate level of insurance for their personal property through their House and Contents Insurance, or Travel Insurance

WINTER PARTY WITHDRAWAL POLICY

Refunds may be applied for in writing addressed to the BCMG

Please contact the bookings officer as soon as you discover you may not be able to go to your winter party to discuss the issue.

There may be a waiting list so substitution is not permitted

Withdrawals received more than 1 month prior to winter party will receive a 90% refund.

Withdrawals received less than 1 month prior to winter party will incur a \$100 penalty.

The BCMG reserves the right to determine refunds on a case by case basis.

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.

Signature of Participant: **Date:**

Parent/Guardian (if under 18 y/old): **Date:**

Notes:

1. In the case of a child, it is a Parent's responsibility to ensure that the Association is promptly notified in writing of any potential long-term affects of an injury or illness resulting from a scouting activity in which the child participated.
2. In the case of an Adult, it is his or her responsibility to ensure that the Association is promptly notified in writing of any potential long-term affects of an injury or illness resulting from a scouting activity in which he or she participated.