



ADULT MEMBER / LEADER

Revised 20 March 2012

International Office –
Scouts Australia

APPLICATION TO JOIN AN AUSTRALIAN CONTINGENT TO AN INTERNATIONAL EVENT

Please attach photograph of applicant here with paper clip only.
(No staples or glue)

ADULT APPLICATION:

I, (print full name in Block Letters)..... (Applicant)

wish to be considered for selection to attend the 12th New Zealand Venture – Venture South.

I understand and agree to abide by the Scout Promise and the Scout Law which I acknowledge is the Code of Conduct and Ethics for this Contingent.

- As a worthy member and loyal ambassador for both Scouts Australia and Australia in general I also agree to accept the conditions and requirements as set by Scouts Australia, the Contingent Council and the Venture.
- I understand and agree that drugs, alcohol and any other illegal activity as decreed by Scouts Australia and also by Australian and overseas Law are illegal for me as a member of this Contingent.
- I have signed the Agreement and Authority on this application, and I agree to be bound by the terms and conditions therein.

Signature of Applicant: **State:** **Membership No:**

Applicant Details

Leader

Rover

Male

Female

Family Name: Given Names:

Scouting Name (if applicable): I like to be called:

Date of birth: Religion:

Address: Flat/Unit No: Street No: Street/Road:

Suburb/Town: State: Postcode:

Postal Address, if different from above

Address: Suburb/Town: State: Postcode:

Telephone numbers: home (.....), work (.....), mobile

Email address (for Venture related correspondence)

Section: **I have / have not completed Advanced Training.**

Scout Group: District: Region:

Venturer Unit Name

Previous Venture experience:

.....

.....

NATIONALITY: **PASSPORT NUMBER:** **Expiry Date:**

First Emergency Contact (during Venture and/or Tour)

Family Name: Given Name: Relationship:

Address: Flat/Unit No: Street No: Street/Road:

Suburb/Town: State: Postcode:

Telephone numbers: (.....)..... (home), (.....)..... (work), (mobile)

Second Emergency Contact (if required, tick box and write details on back of form)

Applicants Full Name:

Medical Statement (Applicant to complete)

Medicare number Line number Expiry Date/.....

Private Health Fund Yes No Fund Name: Membership No:

Ambulance Member Yes No Included in Health Fund Yes/No Membership No:

(A) Immunization: It is recommended that the applicant is fully immunized as per the National Health & Medical Research Council schedule. Check this with your doctor and also provide date of your last tetanus immunization.

Does the applicant wear a **medical alert**? Yes No Necklace Bracelet **Last tetanus (year):**

(B) Does the applicant take any medication regularly? Yes No If yes, please give details below

Drug	Dose	Method of Administration
.....
.....

(C) Does the applicant have any allergies? Yes No If yes, please give details below

- 1 *Antibiotics
- 2 *Foods
- 3 *Food dyes/colourings
- 4 *Nuts
- 5 *Bandages/Dressings
- 6 Bee, Ant or Wasp sting
- 7 *Animal Hair
- 8 Dust mites
- 9 *Drugs (other than antibiotics)
- 10 *Other

* Extra information

(D) Does the applicant use any medical aids? Yes No If yes, please give details below

- 1 Asthma inhaler/pump
- 2 Back Brace
- 3 Dental braces/orthodontics
- 4 *Wheelchair
- 5 Pacemaker (heart)
- 6 CPAP pump
- 7 Incontinence aids
- 8 Insulin pump
- 9 *Other

* Extra information

(E) Does the applicant have any special dietary requirements? Yes No If yes, please give details below

- 1 Coeliac (wheat/Gluten free)
- 2 Diabetic
- 3 Low Cholesterol/fat
- 4 Lactose intolerant
- 5 Vegan
- 6 Vegetarian
- 7 Kosher
- 8 Halal
- 9 *Other Religious or Cultural
- 10 *Other Health (must have doctors letter attached)
- 11 *Specific Food allergies (Nuts, Eggs, dairy etc)

* Extra information

(F) If the applicant suffers from a Medical, Physical or Behavioural condition, please indicate below so that provision can be made for their welfare.

- 1 ADD or ADHD
- 2 Angina
- 3 Arthritis
- 4 Asthma
- 5 Back Problem
- 6 Bed Wetting
- 7 Bleeding disorder
- 8 Blood Pressure
- 9 Bronchitis
- 10 Diabetes
- 11 Epilepsy / Blackouts
- 12 Hay Fever
- 13 Heart Trouble
- 14 Migraine
- 15 Sleep Walking
- 16 Spasticity
- 17 Stroke
- 18 Travel Sickness
- 19 Urinary Problems
- 20 Visual impairment
- 21 Autism or Aspergers Syndrome
- Other (attach details)

Extra information

Signature of Applicant: Date:

***** PLEASE PHOTOCOPY THIS MEDICAL STATEMENT FOR YOUR FUTURE REFERENCE *****

Should the applicants Medical, Physical or Behavioural condition change from the information provided, in any way, before departure for the Venture, it is your obligation to advise the Contingent Administration Officer immediately, in writing, of such a change.

AGREEMENT, ACTIVITIES AND AUTHORITY (ADULT):

To be completed by applicant.

Applicants name:

In consideration of Scouts Australia, (which term includes each Branch thereof and the Venture Contingent Council) accepting this application for the Venture.

I **(being the above named Applicant)**

- ..acknowledge that the activities conducted at the Venture will involve physical tasks which inherently contain risk of injury. I understand that those activities are carried out on a challenge by choice basis, and that I may decline to participate in any one or more activities.
- ..agree that in the event of accident or illness, I authorize an officer, servant, agent or leader of Scouts Australia to obtain on my behalf, and at my expense, such urgent medical or dental assistance, treatment, nursing, hospital and/or ambulance service as may be considered appropriate by such officer, servant, agent or leader of Scouts Australia, and (should it be advised by a duly qualified medical practitioner that it is necessary) to authorize a general anaesthetic.
- ..agree to pay on demand to Scouts Australia, all such medical, hospital and other fees and expenses incurred or to be incurred by Scouts Australia in such circumstances other than such fees recoverable under any policy of insurance taken out by Scouts Australia.
- ..understand that I am expected to act and behave in accordance with the acknowledged principals and rules of Scouts Australia and the Venture Camp Chief. Should the Venture Camp Chief or the Contingent Leader determine that I have not acted or behaved in such manner, I understand and agree that, at the discretion of the Venture Camp Chief or the Contingent Leader, I may be returned home by the most direct means at my expense and no claim can or will be made by me for any compensation or damages.

PHYSICAL ACTIVITIES / MANUAL SKILLS / LANGUAGE / OTHER SKILLS:

Please indicate briefly what physical activities / pursuits / other things you are best at, the degree of difficulty you can handle, any Certificates (please attach copies) supporting your involvement and expertise in such activity (s) / skills. Please also include the sort of activities / things that you are not so good at:

.....

.....

.....

I request that you consider this application to attend the Venture.

- I agree to pay the Venture fee according to the payment schedule and enclose the necessary deposit.
- The medical statement has been completed correctly to the best of my knowledge.
- I acknowledge the existence of the authority within this application form that it has been drawn to my attention and that I have read and understand the nature and effect of the authority and I agree to abide by the above statement of agreement and authority.
- I acknowledge the information contained in this form will be used exclusively by Scouts Australia for the purpose of the Venture and that the privacy policy of Scouts Australia at www.scouts.com.au applies.

.....
Signature of Applicant

.....
Date

Group Leader / Leader-in-Charge - Comments and Recommendation

In recommending this applicant, I certify that I have personally checked this application for accuracy and completeness.

He/she is a currently registered member of the Branch of Scouts Australia.

Please use the space below to provide the Contingent Leader with additional information that will help to ensure that the applicant is allocated appropriate responsibilities within the contingent. Attach additional pages if required.

.....
.....
.....

Name of Group Leader/Leader-in-Charge: (block letters)

Signature: Date:

Contact telephone nos: (.....) home, (.....) work, mobile

Position: (GL / LIC – Please forward this form to your DC or RC promptly)

District or Region Commissioner - Comments and Recommendation

.....
.....
.....

Name: Signature: Date:

Position: (DC or RC – Please forward this form to your Branch HQ promptly)

Branch Headquarters to complete promptly and send form with a copy of the Leader’s Service Record to:

**Australian Contingent
12th New Zealand Venture.
PO Box 3401
Gippsland Mail Centre. VIC. 3841**

Branch: please tick the following as appropriate or leave blank:

This Branch knows this applicant: -

- To be an active member of the Branch
- To have a good understanding of Scouting in Australia
- Contributes to level appropriate activities (District / Region / Branch)
- Sets a good example to youth members and other adult members
- To be adaptable to the needs and conditions of an overseas event
- Works well within a team
- Is able to fulfill a variety of roles

This Branch recommends this Leader who is in good standing with the Scout Association, to join this National Contingent, believing that they will contribute positively to the Contingent. Further, this Branch believes that this Leader will be a worthy Ambassador for Scouts Australia.

Signed by **Chief Commissioner of Branch:**

Branch: **Date:** **Phone:**

Contingent HQ to complete

Date received:

Completed Applications

All applications must be accompanied by a deposit of \$300.00 – Before sending the application form, please refer to the **EVENT INFORMATION SHEET** for payment options/details and closing date. Cheque, money order or EFT payments are preferred.

Credit Card payments will be accepted but all Credit Card transactions will incur a 1% surcharge.

Please post completed applications with all endorsements & signatures:

Australian Contingent
12th New Zealand Venture
PO Box 3401
Gippsland Mail Centre VIC 3841

Payment methods **Cheque** **Money order** Cheques & money orders payable to "Scouts Australia"

Cheque / Money order No:	BSB No:	Account No:
Drawer (name on cheque):		

OR **EFT** Payments can also be made by **direct credit** to Scouts Australia Bank Account – details as follows:
The Scout Association of Australia – Overseas Contingent Account Westpac Banking Corp – Chatswood NSW
BSB: 032090 Account No: 327635 Reference: NZV YOUR NAME for example: NZV John Smith

When making EFT payments, please ensure you email admin.nzv2013@scouts.com.au to confirm payment has been allocated.

OR **Credit Card**

(If paying by Credit Card please complete the following) **MasterCard** **Visa**

Card Number Expiry Date

Name on Credit Card

AUD\$**300.00** Signature:

Additional NZV2013 Questions

I wish to participate in the pre tour which departs on 26th December 2012 for Adelaide and Perth groups, and on 27th December 2012 for all other capital cities.

I understand that the pre tour is an additional AU\$1000

OR

I will not be participating in the pre tour.

I WILL be travelling with the contingent TO the Venture/Pre Tour.

OR

I WILL NOT be travelling with the contingent TO the Venture/Pre Tour.

Please state reason:

.....

I WILL be travelling home with the contingent FROM the Venture.

OR

I WILL NOT be travelling home with the contingent FROM the Venture.

Please state reason:

.....

All Independent travel is subject to Contingent Leader approval.



Australian Contingent to 12th New Zealand Venture Venture South – Riverton Southland



4 to 15 January 2013

Optional Pre-Tour: 27 Dec 2012 to 4 Jan 2013

All applications must be made directly through the Australian Contingent – No direct applications are allowed.

Eligibility

Venturer

Be aged at least 14.5 years and not have had their 18th Birthday by 4 January 2013
Must be a registered and invested Venturer, and hold the Venturer Skills Award
Must be recommended by their Venturer Leader, Group Leader & District Commissioner
Must be accepted by the Australian Contingent

Leaders

Be a registered Leader holding a Certificate of Adult Leadership with Scouts Australia
It is preferred that Leaders be Leaders of Youth within the Venturer Section
Must be endorsed by your Group, District, Region and Chief Commissioner
Must be accepted by the Australian Contingent

Applications are open until 31st August 2012 or until all available positions are filled. All applicants must register using the Australian Contingent's online portal available at www.nzv2013.scouts.com.au

Fees

Venturers	AU\$2390*	which includes airfares, all meals, Venture fee & Contingent Fee.
Leaders	AU\$2190*	which includes airfares, all meals, Venture fee & Contingent Fee.
Staff / Rovers	AU\$2140*	which includes airfares, all meals, Venture fee & Contingent Fee.

Pre Tour	AU\$1000	This optional tour adds 9 days to the start of your trip and includes all meals, accommodation, transport, and most activities. Why not make the most of airfare and spend some extra time exploring the wonders of New Zealand.
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* These prices are based on traveling from either Melbourne or Sydney. For members leaving from other ports there is an additional travel surcharge due to increased flight costs. Please check the surcharge amount on our website at: www.nzv2013.scouts.com.au/surcharge.php

As part of the Venture, Venturers and Leaders participate in an expedition of their choice, which is an additional fee based on the expedition chosen. We have been advised expeditions will range from AU\$120 to AU\$400.

Payment Schedule

\$300 due on application	
\$500 due on 30 April 2012	\$500 due on 30 May 2012 (only if doing pre-tour)
\$500 due on 30 June 2012	\$500 due on 30 July 2012
\$500 due on 30 August 2012	\$500 due on 30 September 2012 (only if doing pre-tour)
Any remaining balance & expedition fee due on 30 October 2012	

For members that make an early full payment by 30 June 2012, we will include a Snowgum Wind Stopper vest embroidered with the Contingent Logo for FREE, normally worth \$129.

Payment can be made by Cheque, EFT or Credit Card. Credit cards attract a 1% surcharge.

More Information

You can find more information at www.nzv2013.scouts.com.au or by contacting:

Gary Steinhardt

Contingent Leader

Ph. 0418 545 325

Email. gary.nzv2013@scouts.com.au

Phillip Britt

Deputy Contingent Leader

Ph. 0418 528 521

Email. phil.nzv2013@scouts.com.au