PRIVACY POLICY: Wirraway collects personal information from campers so that we can: 1) inform our staff of relevant personal health needs of students to protect campers from situations where allergies or health issues could result in unacceptable outcomes 2) contact parents/guardians in the event of an emergency. Information will be destroyed when no longer required.

CONFIDENTIAL **DATES OF CAMP……..……..……..**

WIRRAWAY HOMESTEAD
SCHOOLS APPLICATION FORM

NAME OF APPLICANT ..... **M/F**..... **DOB**.....
GIVEN NAME *SURNAME*

ADDRESS .....

..... **POSTCODE** .....

EMERGENCY CONTACT:

PARENT'S/GUARDIAN'S NAME: .....

PHONE: Home: ..... Business: ..... Mobile: .....

Please supply the following information: *(tick boxes)*

1. Is the Applicant any of the following? **Yes / No** **Details**

Vegetarian	.....	☐	☐	.....
Gluten Free	.....	☐	☐	.....
Dairy Free	.....	☐	☐	.....

2. Does the Applicant have any of the following?

Bee Sting Allergy	.....	☐	☐	.....
Asthma	.....	☐	☐	.....
Bed Wetting	.....	☐	☐	.....
Allergies	.....	☐	☐	.....
Epilepsy	.....	☐	☐	If yes, what was the date of the last seizure and what type of seizure?

.....

.....

3. Is there any other information about your child that will enable us to support your child accordingly? .....

.....

.....

(Please add additional information to the back of this form, if more room is needed)

4. Does your child have a health care plan with the school? Yes ☐ No ☐

5. Year of last tetanus vaccination: ..... **6.** Medicare Number: .....

N.B. Please note that horse riding can be dangerous. Wirraway horses are chosen for their suitability for the program and good temperament. However it needs to be noted that a horse is a living animal with a will of its own, and it may act in an unpredictable fashion. It could bite, kick, startle and run off, trip or slip, and put the rider or handler at risk of injury.

I, the undersigned, agree to the Applicant attending Wirraway Homestead for the period noted above, and agree to him/her participating in the activities provided by Wirraway. These may include horse riding, archery, swimming, sheep herding, bushwalking, initiatives, ropes course, climbing wall, trampolining, and other activities. The Applicant will be required to observe all necessary safety rules. I appreciate that there are risks involved in these activities and in this environment. I understand that whilst every care will be taken, Wirraway's staff and leaders cannot guarantee that the campers will not sustain personal injury, or loss or theft of property during their camp.

I agree to advise Wirraway Homestead if, prior to the commencement of the camp, the Applicant contracts any ailment considered likely to be detrimental to the health of other campers.

I authorise the CEO of Wirraway Homestead, or staff, to obtain for the Applicant all medical treatment and attention considered reasonably necessary, at my expense, provided I am notified of the circumstances and treatment required as soon as practicable.

SIGNED .....
(PARENT/GUARDIAN)