**(OSCAR) Survival Registration Form**

**Please use one form per camper – complete all pages.**

CAMP BEING APPLIED FOR: Start date   /  /  Finish date   /  /

**CAMPER/Junior LEADER DETAILS**

Last name:

First name:

Name preferred or known by:

Address and postal code:

Email:       (of Camper or Junior Leader)

Age:    Sex:  Date of birth: (Day  / Month  / Year   )

School class before camp: yr

Church normally attended if any:

Friends in same Group? (Limit 2):       and

**PARENT’S/GUARDIAN’S DETAILS**

Last name:

First name:

Relationship to child:

Contact phone numbers:

Parent/Caregiver 1 (home)   -   -      (work)   -   -      (mobile):

Person’s Name:

Parent/Caregiver 2 (home)   -   -      (work)   -   -      (mobile):       Person’s Name:

Additional contact number (relative/ friend):   -   -      (work)   -   -      (mobile):       Person’s Name:

Email (Adult):       \* (this form must be returned using this email address)

**CAMP FEES** (all fees must be paid no later than 1 week prior to camp)

$ 50 registration fee… payment must accompany this form

$175 balance of camp fee…

 $225 Total Camp fee (without “Extra’s”)

**EXTRA’S** (the below fees are optional)

$23 or $46 Bus fee\*…

\*This fee is for the camp bus going to camp from Hamilton bus depot ($20) and the fee to return on the camp bus back to the Hamilton bus depot ($20).

 $12 Paintball fee\* …

\*This fee is only for campers 11 years of age or older who wish to participate in paintball.

$12 Special Diet\* …

\*This fee is payable for any camper requiring special dietary needs.

$12 - $15 Canteen \*…

\*The canteen is available for 5 of the camp days. We recommend between $12 and $15. This amount is totally at your discretion.

**TOTAL FEES TO PAY** $

Fees accompanying this form $

Balance to pay $       (to be paid one week prior to camp)

To pay by internet banking use the account number 03 0175 0013647 02 and quote young person’s name as the reference.

To pay by cheque, please make cheques payable to Camp Raglan and mail to:

Camp Registrar, Camp Raglan PO Box 8774, Symonds St, Auckland 1150

**I am registered to receive OSCAR Funding toward camp fees**

**I have WINZ Approval of OSCAR funding for this application**

**TRAVEL DETAILS** (NB - check appropriate boxes)

[ ]  Arriving at camp by own transport

[ ] Taking the camp bus from Hamilton to camp

[ ]  Booking on Intercity\* Transport to Hamilton (these campers will then proceed from Hamilton to camp on the camp bus)

[ ]  Leaving camp by own transport

[ ]  Taking the camp bus from camp to Hamilton

[ ]  Booking on Intercity \*Transport from Hamilton (these campers will first travel on the camp bus to Hamilton)

\* Booking is YOUR responsibility; **please contact us with Intercity Booking number after you have booked ticket(s)**. **Note**: You may be able to obtain a cheaper fare with another bus company but it is **important that the bus you book arrives within 10 minutes of the intercity bus and we have full details of your booking and arrival and departure times.**

**Health and Safety**

[ ]  PERMISSION I give my permission for this camper to participate in the programmes and activities offered by the camp. I give permission for them to participate in all physical activities offered which could include any of the following: Confidence course, BMX, Flying Fox, Archery, Indoor Gym, Swimming/Hydroslide, Bush and Beach walks, Quad Bikes, Paintball, and Climbing Wall etc.

Please state any activities your young person cannot participate in due to physical/health issues. See Medical Section.

Swimming: To enable us to give your young person the best care that we can either in our own camp pool or at the hot pools please give details of your young person’s swimming ability/safety round water

[ ]  PERMISSION I give my permission for this camper to be transported by camp van or by charter bus to and from activities during the camp as per the following policy

Young people travelling to and from Camp Raglan either travel with their parent/caregiver or nominated driver and they are responsible for them until they are registered at camp and after they have been signed out of camp.

Young people who travel by “Intercity bus” to Hamilton or are dropped off by parents in Hamilton. We will transport these young people to and from camp in a Charter bus or camp van (depending on numbers) There is always one or two leaders (depending on number of children) supervising the collection of young people from Hamilton and their return either to their parents/caregivers at the Hamilton bus depot or into the care of the “Intercity bus” driver for final transportation to their home destination. We maintain a record of all Intercity booking numbers and those young people requiring one must have a signed unaccompanied minors form.

Young people are also transported during camp by chartered bus and or our own camp vans to the hot pools and also to the beach for some activities. Our vans are only driven by drivers over 25 with a full license.

If you know that your young person (any age) is a restless sleeper or is likely to sleep walk please give details so that we can allocate them to a bottom bunk for their safety

If your young person is bringing a scooter or skateboard to camp they **must** **also bring a helmet** which is to be worn while the scooter or skateboard is being used

**MEDICAL SECTION**

This must be filled in for the camp to accept your young person’s registration. (Please select **“YES”** or **“NO”** for every box and give explanations when appropriate)

Does your child have any Diagnosed Conditions?  (e.g. Asthma, Diabetes, Epilepsy, ADHD etc)

If yes, please name the condition(s) and any information we should know . about:

Any problems with hearing or vision?

If yes briefly explain:

Is your child allergic to any medication or food?

If yes Please state which ones:

Are your child’s immunizations up to date?

When was their last Tetanus injection?    /    /

Does your child sometimes wet the bed?

If so, please send two lightweight sleeping bags or two pairs of sheets plus an extra set of pajamas and pull-ups.

Does your child have any current medication?

If yes, please list the medication(s) and what they are used for

**Please note that young people attending camp should maintain the same level of medication as when they are at school.**

**All medication** is to be sent with clear instructions of use, and is to be **handed in at registration** at the start of camp.

Are there any Physical / Health / Social/ Emotional Needs of which we should be aware of?

If yes please explain

In the event your child needs to see a doctor, do you have a Community Services Card?

Card number:      Expiry date:   /  /

**I give consent for the camp, when necessary to:** (every question must be answered)

1 . Arrange a medical examination by a doctor…………………….

2 . Give any medication for general health care (eg Panadol)..

3 . Authorize on my behalf any emergency medical care………

4. I agree to reimburse Camp Raglan for all costs incurred…..

NB: Every attempt will be made to contact parents or guardians in the event of an emergency.

**Parent Declaration**

**\*This form must be acknowledged below**

* All information collected on this form can be used by Camp Raglan for mail-outs, follow-up, emergencies and administration.
* For audit and funding purposes the ministry of social development have the right to view details provided on this registration form.
* Camp Raglan will not accept registrations for children who would constitute a danger to themselves or other people. We have zero tolerance of bullying and harassment.
* If full disclosure is not given, we will not accept responsibility for any issues that occur as a result.
* Please do not send your young person to camp if they have had diarrhoea or vomiting within 48 hours prior to camp commencing.

**Extra Questions:**

Young Person/Camper’s Name:

Is there anyone who legally should **not** have access to your child/children while at camp either by visit, phone message, email or fax? (select from box)

If YES please list their name:

If there are legal documents supporting no access to your children, please supply copies. (Scan and e-mail to info@cbm.org.nz)

Note the name of such documents on the line below.

Info:

Is there other information we need to be given to provide proper care for your child?

Info:

Please state who **will** be collecting your child after camp. If you are unsure, list all possible people.

Names:

\* **Young people will only be accepted into camp if the Parent/Guardian Declaration is acknowledged**

**Declaration by Parent/Guardian:**

* I understand that my child is expected to abide by all camp rules.
* I consent to all the information supplied on this form being used for the purpose of running the camps.
* In the event of sickness or accident I authorise that qualified medical attention be secured and any expenses incurred will be paid before my child leaves camp.
* I agree that the trustees, staff and leaders will be clear of all liability in the event of any injury or loss which the camper may sustain to person or property.
* If necessary I will collect my child if it is not appropriate for them to stay at camp.
* I consent to photos being taken at camp for promotional purposes.

**Parent/Guardian’s Acknowledgement of declaration**

**[ ]  I confirm that all information given in this form is accurate and truthful and agree to the above terms/stipulations/conditions.** (Please check box)

**Date:**   /  /   **Name of Parent/Guardian**

**Paintball Permission**

**This activity is only available to young poeple aged 11 years and over.**

**RISK AWARENESS DISCLOSURE**

Paintball is physically and mentally intense and may require extreme exertion to play and the possibility of injury to myself and/or others does exist. I understand that paintballs can and do leave welts, bruises and occasionally can break the skin.

Risks and dangers may arise from foreseeable or unforeseeable causes included, but not limited to, selection of trail or uneven terrain on the playing field, weather conditions, injury and/or welts caused by the paintballs, and such other risks, hazards and dangers that are integral to recreational activities that take place in a wilderness, outdoor or recreational environment and I hereby accept and assume these risks and dangers.

I have been advised that my child must wear approved protective eye masks that will be provided by Camp Raglan. No other padding, gloves or clothing is provided. Campers are required to wear long pants and long sleeve shirts when participating in the activity. I also understand and agree that Camp Raglan will not be held responsible for damages to clothing or personal belongings. (Paintballs are water soluble, biodegradable, and nontoxic.) I affirm that my child will abide by the rules and regulations presented during the paintball activity orientation.

My child is in good health. I understand that strenuous physical exertion may be required and my child has no known physical disabilities or health problems which will present any risk to his/her participation in the activities.

**Parent/Guardian’s Acknowledgement of conditions for Paintball**

**[ ]  I have read the above information. It is my intention to grant permission for my child to participate in the paintball activity provided by Camp Raglan, and to assume and accept all risks associated therewith.** (Please check box)

**Date:**   /  /

Parent/Guardian Name:

**To return this form:**

1. **Save** this **completed** document to your computer
2. Return it as soon as possible as an email attachment to: info@cbm.org.nzfor security purposes, parent or guardian email must be used to send this form

Parent/Guardian email:

**Enquiries:** Phone (09) 630 5271, Fax: (09) 630 4373,

Email: info@cbm.org.nz Website: [www.campraglan.org.nz](http://www.campraglan.org.nz)

You will receive an email either confirming the young person’s acceptance to camp or, if camp is full, that they have been placed on a waiting list.

We are looking forward to being able to provide your young person with a great camp experience.

Mike Buckley (Uncle Mike) Camp Director

**General Notes**

**At the end of camp we like to give the camp a good clean and make it ready for the next group of campers. If you are able to help with this even for just an hour we would be most grateful. Please indicate below if you can help in this way. Thank you.**

[ ] I am willing to help clean after camp ends number helping: