



Participant application

20 SNOW 20
venture

PARTICIPANT APPLICATION INSTRUCTIONS

10th – 19th July 2020

✉ Snow Venture, C/- 4 Busby Ave, Black Forest, SA 5035

📧 snowventure@sa.scouts.com.au

Application Instructions

- Applications will only be accepted when each of the following are received:
 - Application form **completed** in full,
 - Form is signed by parent/guardian **and** Venturer Leader, and,
 - Full \$430 deposit received.
- This form can be filled in using your computer. Please use a compatible version of Acrobat Reader to complete. **Ensure all fields are completed – incomplete applications will not be accepted.**
- The form must be signed by your Venturer Leader **and** your parents/guardian before it can be accepted.
- An electronic signature from your Venturer Leader will be accepted. Parents/guardians must hand sign in accordance with Scouts SA policy. Sign and post or sign, scan and email your application to the addresses below:
✉ **4 Busby Ave, Black Forest, SA 5035** 📧 **snowventure@sa.scouts.com.au**
- Applications must be received by **31 March 2020**.
- There are limited vacancies for Snow Venture; you will be notified if your application is successful or not.
- Successful applicants will receive an information pack in April with more detail about the trip.

Applications that are sent to any other addresses or are incomplete or without a deposit WILL NOT BE PROCESSED (see point 1 above !!)

Fees

- o The total cost for Snow Venture is \$830, paid in two parts, a deposit of \$430 with application and a final payment of \$400.
- o All cheques / money orders are to be made payable to “**Scouts Australia SA Branch Snow Venture**”.
- o Electronic transfer can be made to :
 ‘**Scouts Australia SA Branch Snow Venture**’, BSB **105 075**, Account **051 083 440**.
If you choose to electronically transfer, please include your **surname** as part of the ‘**reference**’, and advise us that you have done this with a note on the printed copy of the application that you post to us or by email.
- o **Final payment of \$400 will be due 5 June 2020.**

Eligibility

Venturers must meet the following criteria:

- o Have experience hiking and carrying a backpack loaded for an overnight trip - Snow Venture is a physically challenging activity. NOTE: skiing experience is not required for Snow Venture.
- o Be competent in the Outdoor Skills required by the Venturing Skills Award and have achieved this award.
- o Have signed approval from your Venturer Leader to confirm the eligibility criteria (see Application instructions above).
- o Be over 15, but under 18 years of age on the first day of Snow Venture (10 July, 2020).

Refund Policy

- o Please contact the Snow Venture team as soon as you discover you may not be able to go.
- o Refunds must be applied for in writing to the Snow Venture team (via email or address above).
- o There may be a waiting list so substitution with another Venturer is not permitted.
- o Withdrawals received more than 1 month prior to Snow Venture will receive a 90% refund.
- o Withdrawals received less than 1 month prior to Snow Venture will receive a 70% refund.
- o In the event of failure to attend the commencement of Snow Venture or withdrawal during Snow Venture due to evacuation, there will be no refund available.

Using Snow Venture for the Venturer Award or Queen’s Scout Award Schemes

- o 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 (VA/QS Outdoor, VA/QS Pursuits etc.) to this application.
- o Applicants should thoroughly prepare their intent before applying.



Participant Application Form – SA Snow Venture 2020

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

Fields marked with * must be completed for application to be accepted

PERSONAL DETAILS

*SURNAME:		*GIVEN NAMES:	
*PREFERRED NAME:		*GENDER:	*DATE OF BIRTH:
*ADDRESS:			*POSTCODE:
*PHONE NUMBER:	*EMAIL:		
*UNIT:		*MEMBERSHIP NUMBER:	

SNOW VENTURE TEAM - LEADER APPOINTMENT DETAILS (Leaders only to complete)

*Do you have an appointment with Scouts Australia?
*If YES, Appointment held :

CONTACT DETAILS FOR PARENT/GUARDIAN/EMERGENCY CONTACT

Is there any custody issues of which we should be aware? _____

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

*DIETARY REQUIREMENTS

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

Please provide details on a separate sheet. If confidential attach in a sealed envelope

Vegetarian		Vegan		Halal		Kosher	
Lactose / Dairy Free		Gluten Free		Other			

*HEALTH AND WELFARE

HEALTH AND WELFARE

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

Does the applicant have any illness, condition or disability? (Y/N)

Does the applicant wear a Medic alert bracelet or medallion? (Y/N)

Please tick:

ADD / ADHD		Autism / Asperger's		Migraine	
Allergy – Drug		Bed Wetting		Asthma	
Allergy – Food		Diabetes		Epilepsy	
Allergy – Insect		Heart Condition		Physical Disability	
Intellectual Disability		Other:			

Please provide details on a separate sheet. If confidential attach in a sealed envelope

Will the applicant be requiring any medication during Snow Venture (Y/N)

Medication	Dose/Frequency	Illness/Condition

Tetanus Immunisation Date: _____

***EXPERIENCE**

Please indicate your skiing experience:

<input type="checkbox"/>	No experience
<input type="checkbox"/>	Have skied before
<input type="checkbox"/>	Alpine Venturer Unit member

<input type="checkbox"/>	Alpine Rover Crew Member
<input type="checkbox"/>	Bogong Rover Crew Member

***SKI HIRE DETAILS**

Please make the following measurements as accurate as possible as they will be used when booking ski, stocks and boots.

<input type="text"/>	Height (cms)	<input type="text"/>	Weight (kgs)	<input type="text"/>	Shoe size US/UK/EU
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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.

Sleeping Arrangements

In accordance with the policies of Scouts Australia (National Organisation) and Scouts SA (South Australian Organisation) we advise that Venturers will be sleeping in open-plan areas with mixed sleeping arrangements. Individual, segregated toilet and ablution facilities are provided. The Leader team for Snow Venture consists of both male and female accredited Scouting Leaders. By signing below, you agree to these arrangements.

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 to 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 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 me returning home from the event at my own expense with no refund.

Signature of Applicant: _____ Date: _____

PARENT / GUARDIAN APPROVAL (if applicant under 18 years of age)

Signature of Parent / Guardian: _____ Date: _____

VENTURER LEADER APPROVAL

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

Venturer Leader (name): _____

Venturer Leader (signature): _____ Date: _____

20 SNOW 20 venture



Snow Venture is a physically strenuous activity and it is important that all potential applicants are suited to the demands. It is vital that all participants have some bushwalking experience and are competent in carrying a 12-15kg backpack as well as the outdoor skills required by the Venturing Skills Award.

To aid in the acceptance of your application to attend Snow Venturer, please answer the following questions and submit your responses with your participant application form.

How did you find out about Snow Venture?

Why do you want to attend Snow Venture?

Please describe your recent (past 3 years) bushwalking experience. Please include, location, duration and distance.

(Optional) Do you intend to use Snow Venture for an aspect of your Queen's Scout Award? If so, please provide any relevant details.
