

Adult Application When Attending an Activity

A5v20200810

Use of this Form

SCOUTS WA

This form is to be completed by all Adults who are attending a Scouting activity. The purpose is to ensure that the Leader in charge of the
event is aware of the Adults emergency contact and current health details. The Code of Conduct referred to within this form, is attached
to this form at Page 2 for your convenience. The Code of Conduct may also be downloaded from MyScout.

			•		•		
Details				Membersh	ip Number		
Activity				Activity Da	ite		
Name				Date of Birth			
Group/Section				Gender		Male □	Female
Address							
Suburb			State		Postcode	1	
Phone			Email				
Working with Children Ched	ck Card Number, o	or Application Rec	eipt Numbe	r (if required	for this ev	ent)	
Expiry Date for Application	Receipt Number						
Please confirm if you have	reviewed and sign	ned the Scouts WA	Code of Co	onduct'	Yes [□ No	
Health Statement							
The Leader in charge of this activity, to be advised of the Applicant's health and fitness, including any medication (with instructions) the Applicant will bring with them. For special dietary requirements, please provide examples (brand names etc) of what you are able to eat. Attach a separate sheet listing these requirements in detail. Alternatively, you may wish to self cater.							
Known allergies	9				cateri		
Special dietary requirement	ts (even if self cate	ering)					
Medication (type / name)	,		Dosage		Frequency	of Dose	
Other information (e.g. ailm	ents / disabilities)						
Immunisation							
Has the Applicant been immunised against Tetanus in the past 5 years?			Yes 🗌	No 🗆	Date of Immunisation		
If not, may the Applicant be	given a Tetanus	injection should t	he need aris	se?		Yes 🗌	No 🗌
Medicare No		Expiry		Ambulance Cover Yes		Yes □	No 🗌
Private Health Fund Name			•	Fund Member Number (if applicable)			
Emergency Contact							
Name							
Relationship to Applicant							
Address							
Suburb			State		Postcode	1	
Home Phone		Work Phone			Mobile Ph	none	

Please note that any individual/group photo/video taken at a Scouts WA activity may be used for promotional purposes on a Scouts WA managed site. Scouts WA cannot guarantee that the photo/video taken will not be used on other sites.

133 Scarborough Beach Rd MT HAWTHORN WA 6016

Tel: (08) 6240 7700 Email eventsadmin@scoutswa.com.au Website: scoutswa.com.au

Applicant's Agreement

I, the Applicant, give permission for the Leader in charge of the activity to seek medical assistance for myself should the need arise and understand that I will be personally liable for any expenses which may be incurred.

Chicara the heed arise and anderetaria that i w	in be percentally habite for ally c	Aponoco minon	may be meanted
Signature of Applicant		Date	
Printed Name			

Approval (Note: the Leader in charge of this activity must sign approval for the Applicant to attend.)

I certify that I have checked the eligibility of the Applicant and the completeness of this application. I find that the Applicant qualifies in every respect and approve the Applicant as a participant.				
Leader in Charge of Activity (Signature)		Date		

Code of Ethics:

Integrity

We demonstrate Integrity by:

- Acting with honesty, truthfulness and fostering appropriate healthy professional relationships
- Recognising and fulfilling where possible, our obligations to our community
- 3. Taking responsibility for our own actions and developing integrity in others
- 4. Acting with impartiality, truthfulness and honesty.

Respect

We demonstrate Respect by:

- 1. Showing consideration to others, recognising each individual's uniqueness and diversity
- 2. Minimising our impact on the environment and seeking to be good caretakers for future generations
- 3. Committing to members well-being and on-going learning through the practice of positive influence, good judgement and empathy in practice

Courage

We demonstrate Courage by:

- 1. Providing challenging, developmental opportunities to empower young people
- 2. Being good role models in Scouting, demonstrating positive attitudes and willingness to live by the Scout Promise and Law
- 3. Being fair and reasonable

Code of Conduct:

This Code of Conduct is a personal commitment. Its purpose is to protect all members of Scouting. It applies to all Members over the age of 18, regardless of location and role, when engaging with young people and adults in any form. This includes face to face and using technology such as online formats. Parents and guardians who wish to actively participate in Scouting must also follow this code.

I will set an example that I would wish others to follow. Therefore I will:

1. Respect the dignity of myself and others

Tel: (08) 6240 7700

- 2. Demonstrate a high degree of individual responsibility
- 3. Recognise at all times that my words and actions are an example to other members of the movement
- 4. Act at all times in accordance with the Promise and Law, Code of Ethics and this Code of Conduct, thereby setting a suitable example for all
- 5. Not use the Movement to promote my own beliefs, behaviors and practices where these are not compatible with Scouting Principles
- 6. Adhere to the Scouts Australia Child Protection Policy and provide a safe environment for youth members participating in the Scout Program, their parents or guardians and visitors
- Report any conduct seen or heard that does not comply with this Code of Conduct to the appropriate Scouting person

have read, understood and commit to abide by the Code of Ethics and Conduct.			
Signature		Date	
Printed Name			

Email eventsadmin@scoutswa.com.au

Website: scoutswa.com.au

CCOLITC MA	133 Scarborough Beach Rd MT HAWTHORN WA 6016	
SCOUTS WA	T (00) C0 t0 7700	