

Rotary/Parliamentary Education Office
Adventure in Citizenship

Instructions

Save this document to your computer. Your information can be processed more efficiently if you complete the application form onscreen and email it as an attachment, along with a digital photo of yourself, to RAIC@rotarnet.com.au

**Please attach a
passport size photo**
(not required if digital
photo emailed)

Each question needs to be completed. Areas of the form which need to be completed are shaded. You can type as much as you wish in the shaded fields. Use the 'Tab' key to switch between fields. 'Return' or 'Enter' will produce a new line. There are also a few check boxes. Please click the relevant one to indicate your answer.

Alternatively, the PDF version of the application form can be printed and completed manually. Note the final pages require signatures. Even if you email your application form, you must send a hardcopy of all the pages, including the required signatures, with a cheque for \$1000 from your sponsoring Rotary Club.

Rotary/Parliamentary Education Office
Adventure in Citizenship

Adventure in Citizenship Application		
Saturday 30 August to Saturday 6 September 2008		
Applicant Information		
First name:	Preferred name (if different):	Last name:
Date of birth (DD-mon-YY):		Male <input type="checkbox"/> or Female <input type="checkbox"/>
Home address:		
Town/Suburb:	State: select State	Postcode:
Term address (if different):		
Town/Suburb:	State: select State	Postcode:
Sponsoring Rotary Club:		Rotary District:
Federal Electorate where you live:	Name of Federal Member (home):	
Federal Electorate of your school:	Name of Federal Member (school):	
Name of school:	Phone number of school:	
Name of school principal:		
Name of local newspaper:	Phone number of newspaper:	
Preferred mode of travel to Canberra (Some delegates eg Sydney/Albury will use bus): ..	Preferred airport:	
Information to assist our transport officer who will make and pay for all bookings:		

Delegate, Parent and Rotary Contact details	Phone numbers (include area codes)			
	Name	Home	Work (/term)	Mobile
1 Applicant				
2 Mother				
3 Father				
4 Rotary contact				
	Email (home)	Email (work/school)		
1 Applicant				
2 Parent/guardian				
3 Parent/guardian				
4 Rotary contact				
May we include your email address in the program for use by other delegates? Yes <input type="checkbox"/> No <input type="checkbox"/>				
Have you ever visited the national capital? Yes <input type="checkbox"/> No <input type="checkbox"/>				
If so, was it a family <input type="checkbox"/> or school <input type="checkbox"/> visit?				

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Applicant's Name:

Interests and Activities (up to about 100 words for each)

Involvement in your school and/or the community:

Clubs and organisations to which you belong. List any offices held:

Special Interests. Please list experiences in drama, music, writing, sport etc.:

Educational experiences outside your home community:

Briefly describe one or two study projects or major assignments you have completed in the past two years:

Briefly describe any experience in public speaking:

Please list any topics or issues that you would like to explore, or places you would like to see during the Adventure in Citizenship program:

Any other useful information:

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Applicant's Name:

Medical Authority and Indemnity

Medical and Dietary Information

Please include any allergies or medications, and state if asthmatic:

Please state any food allergies or dislikes. State if you are a vegetarian and have special diet requirements:

I, authorise my son's/daughter's Rotary Host and/or a representative of the Rotary Club of Canberra (Inc) or the Rotary Club of Canberra Woden (Inc) to seek appropriate emergency medical and/or hospital treatment for my son/daughter in the event of illness or accident during the Adventure in Citizenship Program and I agree to pay any costs associated with the treatment.

My son's / daughter's **Medicare Number** is

Whilst noting that the Rotary Clubs of Canberra (Inc) and Canberra Woden (Inc) will make every reasonable endeavour to ensure the safety and security of the young delegates to the Adventure in Citizenship, I understand that the Hosts and the Rotary Clubs will not be responsible for any injury or illness which my son/daughter may sustain during travel to from or while in Canberra for the Adventure in Citizenship program.

Signature of Parent or Guardian

Name:

Date:

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Applicant's Name:

Permission to use Images of Delegates

Adventure in Citizenship is an educational program giving delegates a first hand introduction to government in Australia. The program aims to increase delegates' awareness of their responsibilities as citizens, the values and privileges of being Australian, and the role of Canberra as the national capital of Australia.

Your permission, as parent/guardian, is required to use photographs of your child taken during the **Adventure in Citizenship Program** from **30 August to 6 September 2008**. These images may be used in promotion of the program, and the National Capital Authority and Parliamentary Education Office in printed, video and online materials.

Please note delegates will not be identified by name in any materials.

If, for any reason, you wish to withdraw permission for use of images including your child, please contact the Chairman RAIC 2008, who will ensure they are not used in any future material.

I hereby authorise the use of images of my child taken as part of the Adventure in Citizenship program in the ways mentioned above. I declare there are no restrictions that prevent me from granting these rights.

Signature of Parent or Guardian

Name:

Date:

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1. Check that all sections are completed and all contact details are correct
2. Save this form to your computer
3. (optional) Create a new email to RAIC@rotarnet.com.au and insert this file as an attachment
4. (optional) Insert your photo as an attachment
5. (optional) Send
6. Print the application
7. Obtain all necessary signatures on the last page
8. Forward with a cheque for \$1000 from your sponsoring Rotary Club to:

Adventure in Citizenship
PO Box 9001
DEAKIN ACT 2600

Checklist:

- | | |
|---|--------------------------|
| All sections of form completed | <input type="checkbox"/> |
| Parent/guardian signed (twice) | <input type="checkbox"/> |
| Photo attached | <input type="checkbox"/> |
| Cheque attached | <input type="checkbox"/> |
| (optional) Form and photo emailed | <input type="checkbox"/> |
| Post your signed form with cheque
(and photo if not emailed) | <input type="checkbox"/> |