



BOGONG ROVER CHALET

Victorian 2017 Snow Venture Application



Mr/Mrs/Ms/Miss First Name Surname

Address

Suburb State Postcode..... Date of Birth

Tel.No. Hm (.....) Wk (.....) Mobile

Email

Occupation/ Field of Study

Other Skills/Service/Contacts You have which may help the Chalet

Medical/First Aid Training (inc. expiry date)

MEMBERSHIP DETAILS

Please provide all details, both Youth and Leader, past and present. Current Youth registration details are required for Rover prices. Current Leader registration details are required for Leader prices.

REGISTRATION DETAILS

Membership Status:
 Current Former Non-Member
 Youth Member Leader Fellowship Member

Membership No. (Ask your Group Leader)

Group Code (Ask your Group Leader)

Section Venturer Squire Rover
 Ranger Guide Ranger Other

Crew/Unit

Group

District

Region

Branch.....

Other Relevant Memberships (Walking Clubs etc)

SNOW VENTURE DATES (please tick)

Note: These weeks are Friday - Saturday and will not to be broken up

<input type="checkbox"/> Week 1 Vic Snow Venture 1	June 29 – July 8
<input type="checkbox"/> Week 13 Vic Snow Venture 2	Sept 22 - Sept 30

Bookings forms need to be received by the BCMG a minimum of four weeks before the commencement of the Week.

SKI HIRE DETAILS

Please make the following measurements as accurate as possible. They will be used as a guide when booking skis, stocks and boots. If you have any questions about these measurements, then please ask.

- How tall are you? _____ cm.
- To top of wrist _____ cm.
(Arm outstretched above head)
- Shoe size: _____ U.S. / U.K.
(Circle applicable)
- Weight: _____ kg

VENTURER SKILLS BADGE Achieved

All Venturers attending Snow Venture must have achieved their Venturer Skills Badge

EXPERIENCE

I have attended a Winter Party Yes/No How Many:.....

Alpine Venturer Unit Member Year invested:.....

Alpine Rover Crew Member Year invested:.....

Bogong Rover Crew Member Year invested:.....

Baw Baw Rover Crew Member Year invested:.....

Vic. Branch Ski Touring Team

Nobs Training Year.....

Cross-Country skiing experience:.....

Other skiing experience:.....

Working Bee/s attended in 2016/2017

To assist us with further promotions, could you indicate where you received this application form from?

Rover Office	Crew/Unit mail-out	
From another Rover	AGM	
Bogong Bulletin	Promotion Night	
Bookings Officer	Region Rep/Meeting	
Website/Internet	Chalet	
Other		

PAYMENT

Application	Tick	Flat Rate
Snow Venture Only (Weeks 1 & 13)	*** Flat Rate *** √	\$295
Ski Hire (Plastic Boots, Skis & Stocks)		\$110
Transport From Melbourne (Eastern Suburbs)		\$75
Total Payment Enclosed		

Enclose cheque payable to **"Bogong Chalet"** for the total amount

or

By direct deposit to: Bank: Bendigo Bank Limited, BSB: 633-000, Acc #: 133498345
 Account Name: SA, VBRC, Bogong Rover Chalet Bookings

Please ensure you enter an appropriate reference, ie. "vicsnw1 surname firstname"

Return completed *application form* and *cheque or payment receipt* to:
Bogong Bookings Officer, 13 Carlyle Street, CROYDON, VIC, 3136

AWARD SCHEME

If you are planning to use this event towards your Queens Scout, Queens Guide or Duke of Edinburgh's, please specify your intentions here:

.....

.....

MEDICAL QUESTIONS

Do you suffer from any of the following? If yes, please provide details including medication, seriousness, etc.

Table with 8 columns: Condition, No, Yes, Detail, Condition, No, Yes, Detail. Rows include Physical/Mental disability, Diabetes, Infectious disease, Drug Allergy, Insect Allergy, Asthma, Heart Condition, Pregnancy, Food Allergy, and Year of last Tetanus injection.

Other:

Dietary requirements that should be known.....

Do you require prescription drugs? If yes, explain.....

Medicare No: Do you have Health Insurance? No Yes

Are you a member of the Ambulance Service? No Yes

EMERGENCY CONTACT DURING WINTER PARTY

Mr/Mrs/Ms/Miss First Name..... Surname

Relationship to Participant.....

Tel.No. Hm (....)..... Wk (....)..... Mobile

All Participants will need to provide a current health statements at the start of the winter party, this will be sent with your acceptance letter, or can be downloaded from www.bogongroverchalet.org.au

VENTURER LEADER'S APPROVAL

The Bogong Chalet Management Group requires that you have approval to attend Snow Venture. Discuss attending the weekend with your Venturer Leader and get them to email bookings@bogongroverchalet.org.au with approval for you to attend. Applications to attend will not be accepted without Venturer Leader Approval.

VL's Name..... VL's Phone No.....

VL's Email.....

Venturer Leaders Consent (Signature).....Date.....

PRIVACY NOTICE

Upon joining Scouts Australia, Victorian Branch ("the Branch"), you agreed to us collecting personal and sensitive data for the purposes disclosed in our Privacy Policy. In the case of a youth member, you acknowledged a similar understanding and agreement in your capacity as the Parent or Guardian of that member. The Branch will not use your personal and sensitive information for any reason that you would not reasonably expect it to be used. You have certain legislated rights of access to the personal and sensitive information being held in respect of you or your child and you may exercise those rights of access by contacting the Branch Privacy Officer on (03) 8543.9800. You can also contact us by email at: privacy.officer@vicscouts.asn.au

The Branch Privacy Policy may be viewed on our website at www.vicscouts.org.au

I acknowledge that I have read this Privacy Notice and I hereby reaffirm my understanding of the Branch Privacy Policy and my continuing agreement to the collection of personal and sensitive data for the purposes disclosed in that Policy.

INSURANCE NOTE

The Chalet only provides minimal personal property insurance. Participants to winter parties should ensure that they have the appropriate level of insurance for their personal property through their House and Contents Insurance, or Travel Insurance.

The Chalet recommends that all attendees hold a current ambulance service membership. Private health insurance does not always cover the full cost of ambulance transport.

PREFERENTIAL BOOKINGS POLICY

The BCMG reserve the right to apply a preferential bookings policy to Winter Parties. Preferential Booking only applies to Winter Parties that are full prior to early-bird cut-off.

Preference is given in order as follows: 1; Current Rovers with service 2; Current Rovers 3; Other Scouting members with service 4; Other Scouting members 5; Non-members with service 6; Non-members

After early-bird cut off date, it is first in best dressed. Application of this protocol occurs after the early-bird date. If there are no appropriate applicants, NOBS may be appointed from outside of this application group. Service can be in Summer, Winter, or on the Management Group. Preferential Booking for South Australian Snow Venture is managed by the Snow Venture Organisers. Full refund will be given to applicants who miss out and cannot attend an alternate winter party.

WINTER PARTY WITHDRAWAL POLICY

Refunds may be applied for in writing addressed to the BCMG. Please contact the bookings officer as soon as you discover you may not be able to go to your winter party to discuss the issue. There may be a waiting list so substitution is not permitted. Withdrawals received more than 1 month prior to winter party will receive a 90% refund.

Withdrawals received less than 1 month prior to winter party will incur a \$100 penalty. The BCMG reserves the right to determine refunds on a case by case basis. In the event of failure to attend the commencement of your winter party or withdrawal during your winter party because of evacuation due to illness or injury, there will be no refund available.

Signature of Participant:Date:.....

Parent/Guardian (if under 18 y/old).....Date:.....

Notes:

- 1. In the case of a child, it is a Parent's responsibility to ensure that the Association is promptly notified in writing of any potential long-term effects of an injury or illness resulting from a scouting activity in which the child participated.
2. In the case of an Adult, it is his or her responsibility to ensure that the Association is promptly notified in writing of any potential long-term effects of an injury or illness resulting from a scouting activity in which he or she participated.