



# 2010/11 Amazing Rookie Camp

**This years rookie camp is filled with fun activities!**

**Activities include feeding sharks and rays, sand boarding, The Amazing Rookie Race and having a spin on the rescue jet skis.**

**Through all these activities Rookies will enhance and develop their communication, teamwork and leadership skills.**



NEWCASTLE PERMANENT  
**CHARITABLE  
FOUNDATION**

*Here for our community*



# 2010/11 Amazing Rookie Camp

## DETAILS

<b>Depart:</b>	Wednesday 6 October — 1.00pm from Hunter Surf Life Saving Headquarters
<b>Return:</b>	Friday 8 October — 2.00pm <b>Parents pick up venue TBC</b>
<b>Eligibility:</b>	Two U/14 members per club (one male and one female) Two U/15 members per club (one male and one female)
<b>Costs:</b>	\$150.00 (includes Activities, accommodation, catering, transport) Clubs will be invoiced.
<b>How to apply?</b>	Complete the attached application form and return to: HSLs, Kate Preston Rookie Camp, PO Box 44, Carrington NSW 2294 F: 02 4961 4436 E: <a href="mailto:kpreston@surflifesaving.com.au">kpreston@surflifesaving.com.au</a>
<b>Application closing date:</b>	Friday 24 September 2010
<b>Further details:</b>	Kate Preston – Support Officer P: 02 4961 4533 E: <a href="mailto:kpreston@surflifesaving.com.au">kpreston@surflifesaving.com.au</a>

## WHAT TO PACK

- Packed lunch for Wednesday (sandwich/fruit etc). All other meals and snacks will be provided.
- Clothing for the Wednesday, Thursday & Friday
- Joggers / thongs
- Casual and comfortable evening clothes
- PJs
- Warm clothing i.e. jumper & trackies
- Bath towel
- Toiletries
- Small day bag include:
  - Swimmers / togs / cossies / bathers
  - Board shorts / rashie or tshirt to wear in the water
  - Water bottle
  - Beach towel
  - Sunscreen & hat
  - Swimming cap & goggles (if you require them)

**Please clearly label all items with your name.**

NEWCASTLE PERMANENT  
**CHARITABLE  
FOUNDATION**

Here for our community

# 2010/11 Amazing Rookie Camp Application Form

## Personal Details

<b>Club</b>			
<b>First name</b>			
<b>Surname</b>			
<b>Address</b>			
	<b>Suburb:</b>	<b>Postcode:</b>	
<b>Contact Number</b>	<b>Home:</b>	<b>Mobile:</b>	
<b>Email</b>			
<b>Medicare Number</b>			
<b>Private Health Details</b>			
<b>Any Allergies or Special Meal Details</b>			
<b>Shirt Size</b> <small>Please circle size.</small>	<b>Female:</b>	8                      10                      12                      14	
	<b>Male:</b>	XS                      S                      M	
<b>Transport</b> <small>Please circle</small>	Do you require transport to Port Stephens?		Yes                      No
	Do you require transport back to Newcastle (venue TBC)?		Yes                      No

## Emergency Contact

<b>First name</b>			
<b>Surname</b>			
<b>Relation</b>			
<b>Contact Number</b>	<b>Home:</b>	<b>Mobile:</b>	
<b>Address</b>			
	<b>Suburb:</b>	<b>Postcode:</b>	
<b>Email</b>			

**What will it mean to you to wear the red & yellow quartered cap?**


**What do you see as your responsibilities are when you complete your Surf Rescue Certificate?**


\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent/guardian

\_\_\_\_\_  
Date

**In signing this form I acknowledge that:**

√ The information in this application is accurate to the best of my knowledge.

√ I agree to behave myself and agree that if I misbehave my parent(s)/guardian will be contacted to come and pick me up

√ I am keen to participate in the 2010/11 Rookie Camp.

# 2010/11 Amazing Rookie Camp Application Form

## Parent / Guardian Consent:

- I agree to my child to participate in the 2010 HSLs Rookie Camp.
- I acknowledge that my child will be under the care and responsibility of HSLs Supervisors for the duration of the 2010 HSLs Rookie Camp.
- I acknowledge that although HSLs attempt to minimise any risk of personal injury within practical boundaries, that there is an inherent risk of personal injury to my child whilst undertaking physical activities as part of this program.
- In the case of emergency, I authorise HSLs supervisors, where it is impractical to communicate with me, to arrange for my child to receive medical treatment as may be deemed necessary and take responsibility for any costs incurred.
- I acknowledge that my child's name and any photographs taken of my child during the course of this program may be used for marketing and promotional purposes by HSLs.
- I acknowledge that the information contained herein is confidential and, pursuant to the Privacy Act, will only be strictly used by HSLs to effectively care for my child and will not be used or distributed for any other purpose.

•

I hereby declare that I have read, understand and agree with the documentation attached and declare that to the best of my knowledge the information provided on this form is true and accurate.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Privacy Act Information

**By submitting this form you are:**

1. **Consenting to Hunter Surf Life Saving using these details for the purpose of administration.**
2. **Acknowledging your right to access, and if necessary correct this information in accordance with the Privacy Act, and subsequent amendments.**

## Club Endorsement

<b>Club</b>	
<b>Name</b>	
<b>Position</b>	
<b>Signature</b>	
<b>Date</b>	

**Return completed application and consent forms to:**

Kate Preston, SLSNSW Support Officer

F: 02 4961 4436

Postal Address: HSLs PO Box 44, Carrington NSW 2294

E: [kpreston@surflifesaving.com.au](mailto:kpreston@surflifesaving.com.au)

**By: Friday 24 September 2010**