



ROOKIE CAMP

ATTENTION U14s!

The HSLs 2009/10 Rookie Camp will be a great introduction to your life saving career.

During the Rookie Camp you will be introduced to the Rookie Program, have the opportunity to meet Rookies from other clubs, complete the Radio Operators Certificate and participate in surf life saving activities!

Depart:	Wednesday 14 October — 8.30am from Hunter Surf Life Saving Headquarters
Return:	Friday 16 October 2009 — 3.00pm to Hunter Surf Life Saving Headquarters
Eligibility:	Five U/14 members per club (mix of male and females)
Costs:	\$100.00 (includes Activities, Rookie Pack, accommodation, catering, transport) Clubs will be invoiced.
How to apply?	Complete the attached application form and return to: HSLs, Kate Preston Rookie Camp, PO Box 44, Carrington NSW 2294 F: 02 4961 4436 E: kpreston@surflifesaving.com.au
Application closing date:	Friday 2 October 2009
Further details:	Kate Preston – Support Officer P: 02 4961 4533 E: kpreston@surflifesaving.com.au
Accommodation:	La Salle Youth Camp Kincumber, Mackillop Road, Kincumber South P: 02 4368 2818

WHAT TO PACK

- Clothing for the Wednesday, Thursday & Friday
- Casual and comfortable evening clothes
- PJs
- Warm clothing i.e. jumper & trackies
- Bath towel
- Bedding—under sheet, pillowslip, sleeping bag
- Toiletries
- Small day bag include:
 - Swimmers / togs / cossies / bathers
 - Water bottle
 - Beach towel
 - Sunscreen & hat
 - Swimming cap & goggles (if you require them)

Please clearly label all items with your name.



ROOKIE CAMP

NEWCASTLE PERMANENT CHARITABLE FOUNDATION

Here for our community

Parent / Guardian Consent:

- I agree to my child/ward to participate in the 2009 HSLs Rookie Camp.
- I acknowledge that my child/ward will be under the care and responsibility of HSLs Supervisors for the duration of the 2009 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/ward 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/ward to receive medical treatment as may be deemed necessary and take responsibility for any costs incurred.
- I acknowledge that my child/ward name and any photographs taken of my child/ward 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/ward 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

Club	
Name	
Position	
Signature	
Date	

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

By: Friday 2 October 2009