

YOUTH SERVICES ENROLMENT FORM

Personal and Confidential Document to be renewed annually

Young Persons Details

Title:	Family Name:	Given Name:	Preferred Name:
Address:			
Email:			
Age:	D.O.B	Phone:	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Self-Described _____ <input type="checkbox"/> Prefer not to say			Pronouns:

Accessibility and Inclusivity

Are there any barriers that you feel will prevent you to accessing or participating in Youth Services programs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, how can Golden Plains Youth Services support you in accessing and participating in Youth Services programs.	

Cultural Diversity

Is the participant of Aboriginal or Torres Strait Islander decent?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say
Does the participant have any cultural requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please specify:	

Participant's Medical Information

(Please Note: Youth Services Staff ARE NOT authorised to administer medications of any kind. In the event of a medical emergency an ambulance or appropriate medical services will be called)

Does the participant have any medical conditions, allergies or take any medication? (Please include food allergies here)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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If yes, please provide details:

Parent/Guardian/Carer's Details

Title:	Family Name:	Given Name:	Preferred Name:
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Address:

Email:	Phone number:
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Relationship to participant:

Emergency Contact (this must be a secondary emergency contact in case we cannot get hold of the above)

Title:	Family Name:	Given Name:	Preferred Name:
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Relationship to participant:	Phone:
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Pick up Arrangements (where the participant is aged under 18)

Is the participant allowed to leave any Youth Program alone? (this includes the Youth Hub, Teenage Holiday Program etc)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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If NO, who is authorised to collect the participant from the program (in addition to the parent/guardian/carers stated above?)

Family Name:	Given Name:	Phone:	Relationship to participant:
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Other Information you wish to disclose regarding the above:

Promotion

How did you hear about Golden Plains Youth Services?

Behaviour Management Agreement

Youth staff will maintain duty of care and safety of young people by managing inappropriate behaviour.

Inappropriate behaviour whilst at any Youth Services program or activity includes:

- Behaviour that threatens the health and safety of the individual young person, other young people, Youth staff/volunteers or the general public
- Use of/attending Youth Services under the influence of illicit drugs/alcohol
- Disrespecting peers or Youth staff
- Offensive and/or aggressive behaviour towards staff, peers or property
- Swearing, bullying, harassment or abusive behaviour during program or towards peers or staff
- Inability to follow instructions/directions given by Youth staff

Actions taken by Youth staff when addressing inappropriate behaviour may include:

- a verbal warning system
- parents/guardians/carers contacted and asked to remove the young person from the program/hub
- refusal of entry to future youth programs

Photograph/Video Consent

I give Golden Plains Shire Council the right to publish photographs and/or video footage of this participant, or in which they may be included, in all Council material, including the Golden Plains Gazette, Annual Report, and on Council's website. I release the photographer and their legal representatives from all claims and liability.

Agree

Do not agree

Privacy Collection, Use and Disclosure Statement

Your personal information is being collected by Council for the purposes of you consenting to participation and attendance at Youth Programs:

- To consent to the use and disclosure of information to Council Staff involved in Programs;
- To ensure young people are supported during service delivery;
- Ensure parents/carers/guardians or emergency contacts can be easily contacted if required;
- Assist with strategic program and service planning, delivery and evaluation;
- Create an opportunity to provide promotional material about our suite of programs and services

Your information will be stored in Council's Database. Council considers that the responsible handling of personal information is a key aspect of democratic governance and is strongly committed to protecting an individual's right to privacy. Council complies with the Information Privacy Principles as set out in the Privacy and Data Protection Act 2014. Council has in place a standard operating procedure that sets out the requirements for the management and handling of personal information. If you have any queries regarding this Privacy Statement, please contact the Privacy Officer on 03 5220 7111.

Consent, Acknowledgements and Arrangements

1. I consent to the participant taking part in this service/program.
2. Excursions are part of program delivery and will operate under normal supervision and program guidelines which may involve walking or being transported by Council buses/cars to venues inside and outside the municipality.
3. Participants attending the Youth Hub and various programs will be required to sign in and out of the program/facility to ensure their safety. Once a young person has signed out of the program, Golden Plains Youth Services staff no longer hold a duty of care for them.
4. If the participant becomes ill or suffers an injury during the program and I cannot be contacted, I consent to the participant receiving first aid and emergency medical treatment (including transport to hospital by ambulance) as deemed necessary by the Council.
5. I acknowledge and agree that any personal items brought to the program by the participant are the responsibility of the participant and that Council takes no responsibility for any personal items which are lost, broken or stolen.
6. I acknowledge and agree that the participant attends the program at their own risk and I agree to indemnify Council, its Councillors, Staff, Volunteers, Contractors and agents from and against any claims, losses, demands, damages, penalties and costs (including legal costs) arising from the participant's attendance at this program.
7. I acknowledge and agree that Council reserves the right to cancel or alter the program at any time.
8. I agree to notify Council in writing of any changes to the information I have provided in this form or the participant's ability to participate in the program as soon as is practicable.
9. I understand that the Youth Hub is a safe space for young people aged 12 -25 years and that Parents/Carers/Guardians are not to enter the Hub, if they wish to discuss anything with staff this can be arranged during office hours, not Hub hours.
10. I agree that the emergency contact has been notified and has consented to their personal information being provided.
11. Where I provided parental/guardian consent, I confirm that I am the parent or legal guardian of the participant named above.

Declaration – I understand and agree to the conditions outlined in this form

Parent/Guardian/Carer	Young Person - Under 18	Young Person – Over 18
Signed:	Signed:	Signed:
Print Name:	Print Name:	Print Name:
Date:	Date:	Date:

Please return this form to Youth Staff at the Youth Hub, Customer Service at either Bannockburn or Smythesdale or email a copy to goldenplainsyouth@gplains.vic.gov.au prior to attending programs.