# ACTIVITY CONSENT AND HEALTH FORM FOR YOUTH MEMBERS ADM.27



# VALID UNTIL 31 DECEMBER 2024

**1** YOUTH MEMBER'S DETAILS

Given Name/s

Surname

Date of Birth

Membership number

Medicare number & IRN

Medicare expiry date

#### **2** HEALTH & WELLBEING INFORMATION

Please help Girl Guides to prepare and care for the health and wellbeing of your Girl Guide. Attach Care Management Plan(s) and/or relevant details (including medications if required).

Do any of the following apply to the above-named member?		
	Epilepsy	
Allergies/Intolerances Fainting		
🗌 Anaphylaxis	🗌 Hay Feve	r
Anxiety	Nose Blee	eds
🗌 Asthma	Religious Requirem	
Autism Spectrum Disorder	_ ·	
Behavioural Issues		
🗌 Diabetes		
Other/Details >		
Do Girl Guides need to be aware of any illness or physical disability of the member?       NO     YES (Please provide details)		
Do Girl Guides need to be aware of anything else regarding your Girl Guide's mental health and wellbeing? If yes, provide details and also attach a Care Management Plan(s) as appropriate. NO YES (Please provide details)		
For water-based activities, can the member swim unaided?		
<b>NO YES</b> (Distance)		metres

#### **DISCLAIMER**

I agree to the named Youth Member, participating in all activities organised by Girl Guides; except the activity/ activities listed below (leave blank if none):

I acknowledge that all activities are conducted within the requirements of *Guide Lines*:

www.guidelinesforgirlguides.org.au. I understand that I can discuss the content of *Guide Lines* with a Girl Guide Unit Leader.

I authorise the Guide Leader in Charge, or her delegate, to obtain first aid, medical, ambulance, dental assistance or treatment, including any anaesthetic or blood transfusion for the named Girl Guide Youth Member. Note: All reasonable attempts to contact you will be made. I consent to the release of health information on this form to any person who provides medical aid and care whilst participating in activities.

I agree to pay for all expenses incurred in obtaining such medical aid and to reimburse the organisation for any expenses incurred.

I undertake that the named Youth Member will not attend any Girl Guide event if she has been in contact with any infectious diseases.

To the best of my knowledge all information is complete and correct.

I agree to the named Youth Member being included in ANY media (including social media).

I agree that I am responsible for notifying Girl Guides regarding any changes to the named Youth Member's health information that is relevant to her participation in activities organised by Girl Guides.

I confirm that the information provided on this form replaces all health and wellbeing information previously provided.

Date

Full name of adult

**Relationship to Youth Member** 

Phone Number

Signature

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## WHO NEEDS TO COMPLETE THIS FORM?

A Youth Member's parent or guardian must complete this Form each year and give it to their Unit Leader. The information on this Form provides the Unit Leader with the relevant information they need to support and accommodate the Youth Member during Girl Guiding activities.

### WHEN DOES IT NEED TO BE COMPLETED?

Parents/guardians are requested to complete an ACTIVITY CONSENT AND HEALTH FORM FOR YOUTH MEMBERS at the start of each calendar year. This form would then be 'current' for the period 1 January through to 31 December and would cover all routine and predictable activities undertaken during the term. This may include camps and overnight stays.

If any box is ticked in the Health and Wellbeing section of the Form, it is the responsibility of the parent/ guardian to provide any applicable additional information, any required medication, and include Care Management Plan(s) as applicable.

Should the Youth Member have a temporary condition or be on medication temporarily (e.g. broken limb, antibiotics), the parent/guardian is to provide the relevant written information to the Unit Leader or Leader in charge (LiC). Likewise, the Unit Leader/LiC is also to be notified when the Youth Member no longer requires the medication. In the case of ongoing conditions and treatment, e.g. epilepsy or asthma, the parent/guardian must note the validity period of the additional information. Any information supplied will only be valid until 31 December of that year.

Should an activity, including adventure-based activities and camps, be undertaken where the LiC is not the respective Unit Leader, an ACTIVITY CONSENT AND HEALTH FORM FOR YOUTH MEMBERS (and Care Management Plans if necessary) will need to be completed and handed to the LiC of the activity or camp.

# **DUTY OF CARE**

Parents/guardians must ensure there is an Adult Member of Girl Guides on-site and that their daughter is 'checked in' with the Adult Member before leaving their daughter at any Girl Guide activity. Parents/guardians are also responsible for 'checking-out' their daughter with an Adult Member and picking up promptly at the end of any Girl Guide activity.

Girl Guides is not responsible for the care of Youth Members when an Adult Member of Girl Guides is not present.

#### **Privacy Collection Statement - Members**

Any capitalised words used in this privacy collection statement which are not defined in this privacy collection statement will have the meaning given to them in Appendix 1 (<u>Definitions and Abbreviations</u>) of the GGA Governance Documents, Volume 2: Policies, Privacy Policy document available at <u>www.guidelinesforgirlguides.org.au/guide\_lines/privacy-policy/</u>

Girl Guides Australia and State Girl Guides Organisations (referred to in this document as Girl Guiding in Australia, we, us or our) may collect, use and disclose personal information about you.

Generally, we collect personal information directly from you, however on occasion we may need to collect additional personal information about you from third parties where collecting directly from you is unreasonable or impractical. For example, we may collect personal information from a parent or guardian of a Youth Member. Generally speaking, we collect and use your personal information for the purposes of considering and/or facilitating your involvement in Girl Guiding in Australia activities, providing goods and services or information to you or someone you know, facilitating our internal business operations, and providing you with information about other goods, services, activities, events, promotions, or special offers that may be of interest to you.

We may be required to collect and disclose information about you pursuant to the <u>GGA Child Safe Child Friendly Framework</u> and the child protection legislation and government policies in place across Australia. If you request to deal with us anonymously or pseudonymously, we will take reasonable steps to comply with your request if it is possible and lawful. However, if you choose not to provide us with your personal information, or it's incomplete or inaccurate, we may not be able to allow you to be involved in Girl Guiding in Australia activities or provide you with the goods and services or information you are seeking. If you are seeking to become a member, we will not be able to process your application if you do not provide the personal information sought.

We may disclose your personal information to our Workers, government departments and agencies, and third parties who assist us in operating our business, third parties to whom you have agreed we may disclose your information, or as otherwise required or authorised by law. Our third-party service providers are too numerous to list, and they change from time to time, but may include payment processors, insurers, IT and technology service providers, event organisers, mail providers, and professional advisers. Some, such as technology service providers, may be located overseas in countries such as the United States of America, for example Google Analytics and Microsoft. Girl Guides Australia is a Member Organisation of the global organisation the World Association of Girl Guides and Girl Scouts (WAGGGS). If you are travelling overseas to a Girl Guides event, your information may be disclosed to other WAGGGS Member Organisations located in the country to which you are travelling. You consent to this overseas disclosure and agree that by providing consent, APP 8.1 under the Privacy Act no longer applies, and we are not required to take reasonable steps to ensure that the overseas recipient does not breach the APPs in relation to that information.

Your personal information may also be disclosed to your parent or guardian, to Adults in Guiding and Other Workers whose role it is to supervise and assess you, and if you consent.

#### In addition:

if you are resident in New South Wales, the Health Records and Information Privacy Act 2002 (NSW) will apply to health information collected and handled by Girl Guiding in Australia;

if you are resident in Victoria, the Health Records Act 2001 (Vic) will apply to health information collected and handled by Girl Guiding in Australia; and

if you are resident in the Australian Capital Territory, the Health Records (Privacy and Access) Act 1997 (ACT) will apply to health information collected and handled by Girl Guiding in Australia.

Our obligations to retain information in accordance with our Child Safe Child Friendly framework may also apply to personal information we have collected from you or otherwise hold.

More detailed information about the types of personal information we collect from you, the way we use, disclose and secure your personal information, how you can access and correct that information, and how you can make a complaint about a breach of privacy can be found in the GGA Privacy Policy, available at Guide Lines (https:// www.guidelinesforgirlguides.org.au/) or by contacting us at:

Street address:	Guide House, PO Box 996, Marsden LPO, QLD 4132
Telephone:	07 3357 1266
Email address:	privacy@guidesqld.org
Website:	https://www.guidesqld.org