

Contact Details

Binambi-Barambah
Aboriginal Corporation

Moira Bligh
311 Church Road
Taigum Qld 4018
Ph: (07) 3865 1004

Heather Jacobs
19 Conroy Street
Zillmere 4034
Ph: (07) 3863 1398

OFFICE USE ONLY

RECEIPT No.

DATE / /

Medical Details

Medical Assistance

I authorise the leaders to obtain any medical assistance deemed necessary should an accident occur, and agree to pay all medical expenses incurred on the behalf of the student.

I further authorize qualified practitioners to administer anesthetics if such an event arises and to seek necessary medical assistance and treatment including blood transfusions.

Current Medications/Administration Details

(please list, or attach list)

.....

Medicare No.

Private Health Care No......

Camp Rules/Regulations

I agree to delegate my authority to the leaders who will take all appropriate actions they deem necessary to ensure the safety, well being and proper conduct of the student/s as a group or individually.

Signed.....

Parent/Guardian

Date / /

Please return Registration Form and Payment to:

Moira Bligh
311 Church Road
Taigum Qld 4018
Ph: (07) 3865 1004

Or

Heather Jacobs
19 Conroy Street
Zillmere 4034
Ph: (07) 3863 1398



Aboriginal Corporation
for Cultural
Enrichment Camps

www.binambi.com.au

CAMP REGISTRATION FORM

**Binambi-Barambah Aboriginal Corporation
CONSENT FORM**

FOR USE OF IMAGES BY BINAMBI-BARAMBAH
ABORIGINAL CORPORATION (BBAC) PUBLICATIONS
AND PROMOTIONAL MATERIALS

Photographic images (including video recording) that are sufficiently clear to enable a person to be identified as an individual is personal information. BBAC has an obligation under its privacy policy to ensure that personal information is used or disclosed only in ways that are consistent with these principles. In general, personal information is not disclosed or published except where an individual's consent has been obtained.

BBAC is seeking your consent to use your and/or your child/s photographic or video images in its corporate and promotional materials. If you AGREE please complete the consent below:

CONSENT

I agree to BBAC using and or reproducing photographic or video images of me and/or my child/ren as explained above.

I AGREE that I will make no claim against BBAC for any payment or fee for appearing in promotional material or advertisements and release BBAC from any other claims arising out of the use of the images of me and/or my child/ren.

Signature

Date / /

Full Name.....

Contact Details :

.....

.....

Register For Camp

Attention Parents/Guardians

For the safety of your child, it is important that the following details are completed clearly and in full.

Should additional help or medical attention be required for your child, the following clear accurate information will assist us in providing the best care for your child.

Permission

As parent/guardian of

(student), I

(parent/guardian) give permission for him/her to participate in the Cultural Enrichment Camp at

.....

Commencing / /

Student Details

Name

Grade Age

Home Address

.....

.....

Post Code

Contact Details

Home Phone

Work Phone

Mobile Phone

Camp Information

Our Next Camp

Cost:

Travel Arrangements

DEPARTURE /ARRIVAL ADDRESS IS:

Nalingu car park - 96 Handford Rd, ZILLMERE

What to Bring

- Clothing for 4 days (T-shirts/shorts/pyjamas)
- Tracksuit
- Walking Shoes/Aqua shoes
- Sleeping Bag or Doonah and pillow
- Toiletries/Sunscreen/Lip Balm
- Togs, Towels (2) & Hat/Cap
- Single Fitted Sheet

Please Note:

- No Electronic Games
- No Radios
- No Money
- No Mobile Phones

**PLEASE ENSURE ALL
ITEMS ARE LABELLED**