

# Medical Information

The following information is supplied in confidence to assist the Youth Minister. If the answer to any question is yes, please supply full details on a separate sheet.

Medicare number \_\_\_\_\_

- |   |     |    |
|---|-----|----|
| 1. Heart Problems                                       | Yes | No |
| 2. Respiratory Problems                                 | Yes | No |
| 3. Travel Sickness                                      | Yes | No |
| 4. Phobia   | Yes | No |
| 5. Operations   | Yes | No |
| 6. Recent Illness                                       | Yes | No |
| 7. Migraines  | Yes | No |
| 8. Blackouts  | Yes | No |
| 9. Sleepwalking   | Yes | No |
| 10. Fits, Epilepsy, etc.                                | Yes | No |
| 11. Special Diet (e.g. vegetarian)                      | Yes | No |
| 12. Any restrictions on activities                      | Yes | No |
| 13. Disability (physical/intellectual/emotional/mental) | Yes | No |
| 14. Drug Reactions                                      | Yes | No |
| 15. Allergies (i.e. food, bee stings)                   | Yes | No |
| 16. Date of last tetanus booster: ____/____             |     |    |
| 17. Is Medication required?                             | Yes | No |

(please note all medication)

ADDITIONAL DETAILS (is there anything the leaders should know that would help your child):

---

---

---

---

ST MARK'S  
BEROWRA  
YOUTH  
IS GOING TO .....

# KYCK 2015



CR

24-26 APRIL 2015 KATOOMBA

# IN APRIL, CLUB REG ARE GOING TO THE KYCK CONVENTION IN KATOOMBA.

## Details

**Dates:** Friday 24th April - Sunday 26th April 2015

**Dropoff:** 5pm Friday at St Mark's, Berowra

**Pickup:** 4pm Sunday at St Mark's, Berowra

**Location:** We'll be staying at The Grange, Mt Victoria (conference centre owned by Barker College)  
Emergency No. 0416 258 292 (Philip)

**Who:** Years 7-8 at school.

**Transport:** A seatbelt equipped mini bus driven by Philip, our Youth Minister.

**Bring:** Warm comfy clothes, Bible, pen, sleeping bag, pillow, torch, toiletries and walking shoes.  
\$\$ for dinner at McDonald's Friday night.

**Cost:** Super Early Bird: **\$230** – (by 27th March 2015.)  
Regular Price \$250 - after 27th March 2015.

Cheques payable to St Mark's Berowra Anglican Church

**Cut-off:** 22 April.

HOWEVER, WE NEED TO BOOK ASAP IN ORDER TO SECURE TICKETS

If money is a problem, please speak to Philip.

## What happens:

KYCK [www.kyck.kcc.org.au](http://www.kyck.kcc.org.au) is a convention for people in high school at the Katoomba Christian Convention Site  
Cnr Cliff Dr & Violet St Katoomba.

We'll be attending the convention Friday night, Saturday morning, Saturday night and Sunday morning. At other times we'll be at The Grange. We have exclusive use of the Grange.

The convention will have great talks, music and a few other bits and pieces.

Supervision will be one leader per six teenagers.

There will be no illegal drugs, smoking or alcohol permitted on this camp.

Any questions, please contact or Philip van't Spyker our Youth Minister on 9456 4498

## Permission Slip for CLUB REG TRIP TO KYCK 2015

### Parents please read, sign and date the following:

My signature below indicates my willingness to permit my child

Address: \_\_\_\_\_

Child's mobile: \_\_\_\_\_

Email: \_\_\_\_\_

DOB \_\_\_\_\_

To attend **KYCK 2015** the weekend of: **24/04/2015** To: **26/04/2015**

I authorise the leader in charge of the above mentioned group where it is impracticable to communicate with me, to arrange for my child to receive such medical treatment as the leader may deem necessary while in the care of the leader. I further authorize the use of an ambulance if in the leader's judgment it is necessary. I accept responsibility for payment of all expenses associated with such treatment.

I appreciate that every care will be taken by the leaders of the above mentioned group. I agree to indemnify and hold harmless the offices of the Anglican Diocese of Sydney and the leaders conducting this group against all claims, suits, demands and liability of whatever nature and howsoever arising out of injury to the child or loss or theft of property affecting my child during the activity

I understand that photos/video will/may be taken during the course of youth activities and I am willing for my child to be filmed/photographed in appropriate settings. I am also willing for these photos/footage to be used in the context of promoting the ministry (eg on a brochure for the group) without identifying their name or details. My child is also willing for this to take place.

Please indicate if you do NOT want photos taken of your child \_\_\_\_\_

I give permission for my child to be transported in a mini-bus or private vehicle during the event under appropriate supervision as arranged by the leaders of the above mentioned group.

PARENT OR GUARDIAN'S SIGNATURE CERTIFYING ACCEPTANCE OF ALL THESE CONDITIONS

Parent's Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Contact number during event \_\_\_\_\_

Alternate contact number during event \_\_\_\_\_