

NARRABRI SHIRE YOUTH COUNCIL APPLICATION FORM (CONFIDENTIAL)

Personal Information

Name of Participant:

Email Address:

Postal Address:

Contact Number:

Mobile Number:

Year Level at school in 2019:

Date of Birth:

Photography

I give permission for myself/my child to be photographed and for this photograph to be used in publicity for the Narrabri Shire Youth Council.

Name of Parent/Guardian:

Signed by Parent/Guardian:

Date:

Health Information

Does the participant have any illnesses, injuries, allergies or medical conditions?
(For example, epilepsy, asthma, diabetes etc) Yes/No

If yes, please provide details:

Is the participant currently taking any medication? Yes/No

If yes, please provide details:

Emergency Contact Information

In the event of any illness, accident or injury being occasioned to my child, I give permission for him/her to be taken to the hospital or a doctor's surgery by ambulance or other means should it be considered necessary by the Community Development Officer or Council representative.

Name of Parent/Guardian:

Contact Number:

Date:

Person to contact in the event of an emergency (local contacts only)

Name:

Relationship to participant:

Contact Number:

Additional Information

Should there be any further details regarding the participant that are important for Council to know, please provide details below.

Permission to Attend

I give permission for (participant's name) to attend Narrabri Shire Youth Council meetings.

Name of Parent/Guardian:

Signed by Parent/Guardian:

Date:

Council Contact Details

For additional information regarding Narrabri Shire Youth Council, please contact Council's Community Development Officer on (02) 6799 6866 or cdo@narrabri.nsw.gov.au.

Forward completed forms to:

cdo@narrabri.nsw.gov.au or mail to

**Narrabri Shire Council
Attention: Community Development Officer
PO Box 261, Narrabri NSW 2390**