

THE BOOKS OF JOSHUA AND EPHESIANS

# STRONG & COURAGEOUS

YOUTH MUSTER 24, 15-17 NOVEMBER, 2024

## YOUTH MUSTER 2024 Permission Form

### Church details

Church: \_\_\_\_\_

### Child's details

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

DOB: \_\_\_\_\_ Gender: Male  Female

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

Suburb/Town: \_\_\_\_\_ Postcode: \_\_\_\_\_

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

School: \_\_\_\_\_ School year: \_\_\_\_\_

### Parent/carer details

Parent/carer name: \_\_\_\_\_ Parent/carer Number: \_\_\_\_\_

Parent/carer name: \_\_\_\_\_ Parent/carer Number: \_\_\_\_\_

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

Suburb/Town: \_\_\_\_\_ Postcode: \_\_\_\_\_

### Health information

Doctor: \_\_\_\_\_ Doctor contact: \_\_\_\_\_

Medicare No: \_\_\_\_\_ Card reference No: \_\_\_\_\_

Private insurer: \_\_\_\_\_ Membership No: \_\_\_\_\_

Can your child swim? No  Poorly  Reasonably Well  Strong

Date of last tetanus: \_\_\_\_\_

Allergies / medication / activity restrictions / behavioural issues: Yes  No

Additional details: \_\_\_\_\_

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## Dietary Considerations

Does your child have any dietary needs that require alternate food options? Yes  No

Additional details: \_\_\_\_\_

**Note:** Please remind your child to look out for the dietary needs table at meal times if this applies.

## Restrictions

Is there anyone who is legally restricted from seeing your child: Yes  No

Additional details: \_\_\_\_\_

## T-Shirt Size

Let us know what size T-shirt your child needs.

Womens - XS  Womens - S  Womens - M  Womens - L  Womens - XL  Womens - 2XL

Mens - XS  Mens - S  Mens - M  Mens - L  Mens - XL  Mens - 2XL  Mens - 3XL

**Note:** T-shirt size guide attached below.

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## Permission

My signature below indicates that:

- I consent to my child attending **YOUTH MUSTER 24** at **Carinya Christian School, Tamworth** from **15-17 November, 2024**.
- I understand that my child will be attending under the supervision of \_\_\_\_\_ (Leader) from \_\_\_\_\_ (Church).
- I appreciate that every care will be taken by the leaders of the youth group.
- I understand there will/may be photographs and or video footage of my child taken during this camp to promote the ministry and have informed the leaders of the youth group if my child does not have permission to publish.
- I give permission for my child to ride in leaders' cars during the weekend.
- I give permission, in the case of a medical emergency, to the doctor chosen (either by the church authorities or other persons supervising or administering the activities), to secure proper treatment for and/or order hospitalisation, injection, anaesthetic or surgery for my child as named. I understand that every effort will be made to contact me prior to instituting such procedures.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

The leadership team of the aforementioned group will treat the information contained confidentially. This information may be shared with a third party when it concerns medical health or care of the individuals listed. If you wish to access this information or have any queries in relation to the manner in which we handle your personal information, please do not hesitate to contact us.

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## MENS BASIC TEE - 5051.

MEASUREMENT	XSM	SML	MED	LRG	XLG	2XL	3XL
Body Width (cm)	43	47	52	56.5	61	64	68
Body Length (cm)	68	71	75	78.5	82	83.5	85

*Please note measurements can vary within 2.5cm, this is within our tolerance.*

## WO'S BASIC TEE - 4051.

MEASUREMENT	XSM	SML	MED	LRG	XLG	2XL
Body Width (cm)	45.5	48	50.5	53	55.5	58
Body Length (cm)	62.5	63.5	64.5	65.5	66.5	67.5

*Please note measurements can vary within 2.5cm, this is within our tolerance.*