



**WE ENGAGE, EQUIP, EMPOWER
AND REWARD
YOUNG AUSTRALIANS.**



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The Duke of Edinburgh's Award in Australia
WA Division
PO Box 7384, Cloisters Square WA 6850
p +61 8 9321 4179
e wa@dukeofed.com.au
w www.dukeofed.com.au
ABN 31 6198 327 859

Participant Application Form

Name:
(First) (Middle) (Surname)

Postal Address:
..... **Postcode:**

Phone: **Mobile:** **DOB:**

E-mail:

Gender: Male Female

Licensed Operator:
(Name of the School or Organisation you are doing Dukes through)

Level of Entry: Bronze Silver Gold

Registration Fee Enclosed: \$66.00 **Yes**
 No

PARTICIPANT DATA:

This information is collected and used for statistical purposes only, to enable us to collect information for the purposes of improving The Duke of Edinburgh's Award in Australia's (**The Award programme**) design, evaluation, access delivery and equity. Please tick the appropriate boxes:

Do you identify as being of Aboriginal and/or Torres Strait Islander origin?

Yes No





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Do you speak a language other than English at home?

Yes

No

Do you have a long-term health condition, or physical or learning disability that we need to know about? (Support can be given and allowances made for these).

Yes

No

OFFICE USE ONLY

ENTERED ON
DATABASE

START
DATE

BOOK
NUMBER

METHOD OF PAYMENT CASH: CHQ: DIRECT DEPOSIT: INVOICED:



PARENTAL OR GUARDIAN CONSENT

This Section must be completed for Participants **Under 18 Years of Age**

I,
(full name of parent or guardian)

of
.....
(address)

Tel:

I am the parent/guardian of the participant named on Page 1 (the **Participant**). I consent to the Participant participating in The Duke of Edinburgh's Award in Australia (The Award programme) under the supervision of **[insert name of Licensed Operator]** and undertaking activities to fulfil the requirements of The Award programme.

REQUIREMENTS AND CONDITIONS

1. I have read and understand the Requirements and Conditions (points 1-12 on page 3) and The Award programme Requirements on page 4.
2. I consent to the Licensed Operator and any other individuals, including volunteers, who are involved in, or assist in, organising The Award programme, transporting the Participant for the purpose of participating in activities or functions related to The Award programme, as required. I understand that the Licensed Operator will notify me in advance of when and where such travel will occur.
3. I understand that certain activities in the High Risk Activities Schedule set out on Page 6 are not covered by the insurance arrangements of the National Award Authority (**Excluded Activities**). I understand that the responsibility for all risks arising from the Participant's participation in Excluded Activities is placed solely upon the Participant.
4. I authorise the Licensed Operator and any other individuals who participate in, are involved in or assist in organising The Award programme, in the event of any accident, injury, illness or loss suffered by the Participant whilst participating in, or travelling to and from, any activities or functions related to The Award programme, to obtain any necessary medical assistance or treatment including, but not limited to, engaging any doctors, nurses or hospital accommodation.
5. I consent to pay all such doctors, nurses or hospital accommodation fees and expenses incurred on behalf of the Participant as a result of any such accident, injury, illness or loss suffered by the Participant whilst participating in, or travelling to and from, any activities or functions related to The Award programme.

Please ensure all signatures are present!

Parent or Guardian Signature: **Date:**

Participant's Signature: **Date:**



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The Licensed Operator agrees to accept the above mentioned as a participant on the terms contained in this form.

Signed on behalf of
The Licensed Operator:..... **Date:**.....

Please send Participant Pack to: Coordinator @ School Participant @ Home



REQUIREMENTS AND CONDITIONS *(Please read before you sign this form)*

Boring but necessary legal stuff

1. I have read and understand the different levels and requirements of The Award programme set out on Page 4 of this form.
2. I understand every participant must participate in The Award programme through a Licensed Operator who has the discretion to accept or reject participants and proposed activities to be undertaken as part of The Award programme.
3. I understand that I cannot:
 - participate in The Award programme until this form has been completed (including Parental or Guardian Consent – on page 2 – if I am aged under 18 years) and returned to the relevant Licensed Operator with the registration fee;
 - commence any particular section of The Award programme until any relevant assessors, instructors or volunteers have completed and returned the required documentation to the Licensed Operator.
4. I understand that on payment of a registration fee I will receive a Record Book **[Record Book does not provide particulars of insurance]**. I confirm I will read the requirements of The Award programme contained in the Record Book, prior to commencing activities in relation to The Award programme. I understand that the State Award Authority has the discretion to determine whether The Award programme requirements have been met and therefore whether a Gold, Silver or Bronze Award should be issued.
5. I understand that the National Award Authority provides participants with limited insurance in respect of Personal Accident and Public Liability Insurance commencing on the date of issue of the Record Book. *Note that Australian Defence Force Cadets are only covered by this Insurance when undertaking specific activities that are not under the guidance of the Australian Defence Force Cadets scheme.*
6. I have read the High Risk Activities Schedule set out on Page 6 and understand that certain activities are not covered by the Insurance of the National Award Authority (**Excluded Activities**). I understand that the responsibility for all risks arising from my participation in Excluded Activities is placed solely upon me.
7. I understand that any participant, or any other individual, not being a person who is involved in or assists in organising The Award programme, who drives a motor vehicle and who is transporting other participants participating in activities related to The Award programme, must hold valid driver's licence (with classing appropriate to the vehicle being given) and relevant insurance to cover risk of injury to people they drive.
8. I authorise employees, officers or agents of the Licensed Operator and any other individuals who participate in, are involved in, or assist in organising The Award programme, in the event of any accident, injury, illness or loss suffered by me whilst participating in, or travelling to and from, any activities or functions related to The Award programme, to obtain any necessary medical assistance or treatment including, but not limited to, engaging any doctors, nurses or hospital accommodation.
9. I consent to pay all such doctors, nurses or hospital accommodation fees and expenses incurred on my behalf as a result of any such accident, injury, illness or loss suffered by me whilst participating in, or travelling to and from, any activities or functions related to The Award programme.
10. I understand that participants are required to and I undertake to comply with The Award programme requirements contained in the Record Book, the policies of the relevant National or State Award Authority (as amended from time to time) and requirements of the State Award Authority and Licensed Operator in relation to emergency plans, assessment of activities and the conduct of expeditions related to The Award programme and understand that the Licensed Operator may withdraw its approval to my participation in The Award programme if I do not comply.
11. I consent to and understand that photographs may be taken of me participating in certain activities related to The Award programme and such photographs may be used for promotional purposes.
12. I consent to the provision of any personal information that I have provided (including participant data) to the Licensed Operator, State or National Award Authorities will be treated in accordance with the provisions of the Privacy Policy of the relevant National or State Award Authority (as amended from time to time) and the National Privacy Principles contained in the Privacy Act 1988 (Cth).



AWARD PROGRAMME REQUIREMENTS

ABOUT THE DUKE OF ED

The Duke of Edinburgh's Award is a personal and social development programme available to youth aged 14 to 25, regardless of gender, background or ability. For each Award, participants design their own programme selecting activities that develop life skills such as leadership, teamwork, decision-making and goal-setting. Potential employers value these attributes considerably. Additionally, participants who fulfil the requirements of The Award will be recognised at an official Award Ceremony.

SUMMARY OF MINIMUM REQUIREMENTS FOR EACH LEVEL OF THE AWARD

	Physical Recreation	Skills	Service	Plus...	Adventurous Journeys
BRONZE Minimum Age: 14 years	3 months (min 1 hour per week)	3 months (min 1 hour per week)	3 months (min 1 hour per week)	an extra 3 months in either skills, service or physical recreation	2 days + 1 night
SILVER Minimum Age: 15 years	6 months (min 1 hour per week)	6 months (min 1 hour per week)	6 months (min 1 hour per week)	Non-bronze holders must do an extra 6 months in either physical recreation, skills or service	3 days 2 nights away
GOLD Minimum Age: 16 years	12 months (min 1 hour per week)	12 months (min 1 hour per week)	12 months (min 1 hour per week)	Non-silver holders must do an extra 6 months in either physical recreation, skills or service	4 days 3 nights away
PLUS An additional requirement of 5 days / 4 nights residential project					

AIMS OF EACH SECTION

SECTION:	AIM:
Service:	To develop a sense of community service and responsibility to others.
Skill:	To encourage the development of personal interests and practical skills.
Adventurous Journeys:	To encourage a spirit of adventure and discovery.
Physical Recreation:	To encourage participation in physical recreation and improvement in fitness and performance.
Residential Project: (Gold only)	To broaden experience through involvement with others in a residential setting.

PARTICIPANT ELIGIBILITY & REQUIREMENTS

1. Any young person aged 13 years and 9 months to 25 can join the programme.
2. The Award requirements must be completed by your 25th birthday.
3. Parental or guardian consent is required for participants under 18 years of age.



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TEN ESSENTIAL PHILOSOPHIES

1. Non-competitive
2. Available to all
3. The value is in the process, not a prize
4. Balance
5. Flexibility
6. Progressive
7. Focus on achievement
8. Marathon, not a sprint
9. Voluntary
10. Enjoyable



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PRIVACY

Boring but necessary legal stuff

The Territory/State and National Award Authorities are committed to respecting your privacy. Your personal information is collected on this form for the purpose of your participation in The Award programme. If you do not provide this information to us, you may not be able to participate in The Award programme (that non-provision of Participant Data does not have this consequence). We may also use your personal information to send you information about other Award programme activities or events which we believe may be of interest to you. We may disclose this information to other Australian and international organisations and service providers who assist us in the operation and administration of The Award programme. If you would like to contact us or access your personal information please write to the National Award Authority or State Award Authority. You may also contact the National Award Authority or/and where applicable, State Award Authority to request a copy of their Privacy Policy

Contact Us:

WA Division

Duke of Edinburgh's Award WA Division
PO Box 7384
Cloisters Square WA 6850

862 Hay St
Perth WA 6000

Tel: (08) 9321 4179
Email: wa@dukeofed.com.au

National Award Authority

PO Box R1959
Royal Exchange NSW 2000

Tel: (02) 9252 2408
Fax: (02) 9252 2982
Email: reception@dukeofed.com.au
Website: www.dukeofed.com.au



HIGH RISK ACTIVITIES COVER – 31 AUGUST 2009 – 31 AUGUST 2010

Registration with The Duke of Edinburgh's Award in Australia provides limited insurance in the areas of personal accident and public liability while undertaking Award activities. Details of these policies may be obtained from your State Award Office.

Activity	Personal Accident	Public Liability
Parachuting	NO	NO
Flying Aircraft	NO	NO
Hang Gliding	NO	YES
Hot Air Ballooning	NO	YES
Sky Diving	NO	NO
Small Aircraft Flying – Pilot Training	NO	NO
Bushwalking	YES	YES
Walking in Remote Areas	YES	YES
Cross Country Skiing	YES	YES
Expeditions	YES	YES
Football/Soccer	YES	YES
Horse Riding (all safety equipment worn at all times)	YES	YES
Mountain Bike Riding	YES	YES
Orienteering	YES	YES
Snow Skiing	YES	YES
Tennis	YES	YES
Weight Lifting (under strict supervision)	YES	YES
Abseiling	YES	YES
Caving	YES	YES
Rock Climbing	YES	YES
High Ropes Activity Courses	YES	YES
Climbing	YES	YES
Canoeing	YES	YES
Game Fishing	YES	YES
Kayaking	YES	YES
Sailing	YES	YES
Surf Life Saving	YES	YES
Water Polo	YES	YES
Scuba Diving	YES	NO
White Water Rafting	YES	YES
Pistol Shooting	YES	YES
Rifle Target Shooting	YES	YES
Air Training Cadets	NO	YES
Naval Cadets	NO	YES
Army Cadets	NO	YES
Country Fire Service (excluding participation in real activities or situations)	YES	YES
State Emergency Services (excluding participation in real activities or situations)	YES	YES
Cycling	YES	YES
Driving	YES	YES
4 Wheel Driving	YES	YES
Go Karting	NO	YES
Boxing	YES	Exclusion: Liability
Jujitsu	YES	



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Kickboxing	YES	arising from martial Arts sparring and full contact martial arts.
Kung Fu	YES	
Tae Kwon Do	YES	
Karate	YES	