Application Form - 2025 Summer Camping Program



All-inclusive Camp Fee \$800.00

I WISH TO ENROL FOR (Please tick one): Senior Camp (15-17 years old)	Junior Camp (12 – 14 years old)	
Friday 3 rd – Sunday 12 th of January 2025	Wednesday 15 th – Friday 24 th January 2025	
FULL NAME:		
PREFERS TO BE CALLED: DATE OF BIRTH://		
GENDER: MALE FEMALE OTHER*	AGE AT 1/1/2025:	
*The Camp Icthus camper sleeping huts and amenities are separated by gender. Camp Icthus is a small, registered charity and does not currently have the resources to provided additional gender-neutral facilities. We will work with gender fluid, intersex, non-binary, trans and gender diverse campers and their families before camp to help them identify and agree to the appropriate hut and amenities block assignment and ensure they feel safe at Camp Icthus.		
ADDRESS:		
APPLICANT'S MOBILE NUMBER:	Tick if bringing phone to camp	
APPLICANT'S EMAIL:		
Please provide your child's email address if you conser	nt for communication directly from Camp Icthus.	
SCHOOL LEVEL IN 2025:	NAME OF SCHOOL:	
PRIMARY CONTACT: PARENT/GUARDIAN All	correspondence will be sent via email to this contact	
NAME:	RELATIONSHIP TO APPLICANT:	
MOBILE PHONE:	HOME/WORK PHONE:	
AAIL ADDRESS: HOME ADDRESS:		
SECONDARY CONTACT		
NAME:	RELATIONSHIP TO APPLICANT:	
MOBILE PHONE:	HOME/WORK PHONE:	
EMAIL ADDRESS:	HOME ADDRESS:	
SWIMMING ABILITY (Please tick)		
Non Swimmer	Less than 100m More than 100m	
OUTDOOR EXPERIENCE:		

HOW DID YOU FIND OUT ABOUT CAMP ICTHUS?	
MEDICAL INFORMATION	
APPLICANT'S MEDICARE NUMBER:	
APPLICANT'S REFERENCE NUMBER: #	EXPIRY DATE:
IS THE APPLICANT IMMUNISED AGAINST TETANUS?	YES NO UNSURE
DATE OF IMMUNISATION://	
PLEASE INDICATE ANY MEDICAL CONDITION THE APPLIC PROVIDED:	CANT MAY HAVE AND GIVE DETAILS IN THE SPACE
Asthma (please provide Asthma Management Plan)	Allergies (please provide details and Anaphylaxis Action Plan if required)
Diabetes (please provide Diabetes Management Plan)	Epilepsy (please provide Epilepsy Management Plan if available)
Hay-fever	Behavioural challenges (<i>please provide details</i>)
Travel sickness	Communication challenges (please provide details)
Mental health challenges	Other:
Details:	
IS THE APPLICANT TAKING ANY MEDICATIONS?	No Yes (<i>Please Specify</i>) Dosage:
Other information:	

MEDICATIONS (If required during camp)	OKAY TO ADMINISTER?
Ibuprofen (e.g. Nurofen)	YES NO
Paracetamol (e.g. Panadol, Panamax, Herron)	YES NO
Antihistamine (e.g. Telfast, Claratyne)	YES NO

DIETARY REQUIREN	IENTS	Other (please specify)	
IS THERE ANY OTHE	R INFORMATION THAT OUR LEA	ADERS NEED TO KNOW ABOUT THE APPLICANT TO ENSU	RE

PHOTOGRAPHS

Group and activity photographs may be taken during the camping program by Camp Icthus. These may be distributed to other camp participants or used for promotional purposes. No personally identifying information will ever accompany these images.

Please tick here if the applicant CANNOT appear in promotional photographs for any reason.

THE SAFETY AND HAPPINESS OF THEMSELVES AND OTHERS DURING CAMP?

TRANSPORT	TO CAMP
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Camp Icthus arranges chaperoned group V-line travel from	Melbourne return included in you	r camp fees. Icthus
will book and pay for all tickets in one transaction. As we need to arrange their own V/Line tickets – you will be advised		
WILL YOU TRAVEL TO CAMP BY V-LINE* (Please tick one)	YES NO	

IF COMING BY TRAIN, WHICH STATION WILL YOU DEPART FROM (Please tick one)				
Southern Cross	Caulfield	Dandenong	Pakenham	Other (specify)
IF RETURNING BY TRA	IN, WHICH STATIO	N WILL YOU GET OFF AT (F	Please tick one)	
Southern Cross	Caulfield	Dandenong	Pakenham	Other (specify)

*If V-line changes service to buses, departure may only be available from Southern Cross

Camp Icthus will only chaperone the applicant whilst travelling to and from Camp Icthus on V-line, parent and/or guardians will be responsible for the applicant after arrival at train stations.

PAYMENT - REQUIRED WITH APPLICATION (minimum of \$150 deposit required with application) <u>Reference Camper Name</u> please. The cost of the camp is \$800.00 this includes train travel to and from camp.		
Please make payment by el Account Name: Camp Icthu	•	nternet banking): Account Number: 513-757
Please complete the follow	ing:	
Date Paid	Amount	Bank
Reference	Please contac	ct Chris Forbes 0421 915 571 or Camp Icthus 0403 080 881, to
discuss payment options.		
Please complete ALL SECTIO	ONS of this application	ion form including signed Declaration by Parent/Guardian and
signed camper code of conduct and forward to <u>campicthus@gmail.com</u>		

AGENCY DETAILS – *Please only complete this section if the applicant has been referred by an Agency.*

APPLICANTS NAME:	
NAME OF AGENCY:	
AGENCY CONTACT	
NAME:	MOBILE/WORK PHONE:
EMAIL ADDRESS:	CONTACTABLE THROUGH DECEMBER/JANUARY? YES NO
APPLICANT'S CASE WORKER	
NAME:	MOBILE/WORK PHONE:
EMAIL ADDRESS:	CONTACTABLE THROUGH DECEMBER/JANUARY? YES NO
LEGAL GUARDIAN - Who is the applicants leg	
AGENCY CONTACT CAS	E WORKER OTHER (please enter details below)
PAYMENTS – Who is responsible for paymen	ts, ie. who should we send invoices/receipt to?
AGENCY CONTACT	E WORKER OTHER (please enter details below)
IS THERE ANYTHING ELSE WE SHOULD KNOW	V ABOUT THE APPLICANT?
ie. Language barrier with family, siblings also attendin	g, knows of others attending camp, any concerns you may have?

CAMPER CODE OF CONDUCT



THIS DOCUMENT MUST BE READ AND SIGNED BY BOTH THE CAMPER AND PARENT/GUARDIAN.

Camp Icthus is a Child Safe organisation. All campers who come to Icthus have a right to feel and be safe and are expected to comply with the Camp Icthus Camper code of conduct.

The following regulations will be explained to all campers on arrival at Summer Camp.

- All mobile phones, electronic equipment, and any weapons, including knives, must be handed to leader responsible for valuables on Day 1 of Summer Camp.
- Alcohol and illicit drugs (including vaping) are strictly prohibited.
- Smoking is allowed in designated areas only.
- Camper huts are for sleeping, packing for overnighters and changing clothes and shoes only. Campers are not to congregate in camper huts.
- Wildlife may be observed from a safe distance, do not approach or chase.
- A one leader to four camper ratio must be adhered to for swimming and washing dishes on overnighters.
- Campers are not to use water craft unless under the supervision of a leader.

1. Campers are expected to

- Treat everyone with respect and try to get along with everyone on camp
- Speak politely, using positive and encouraging language
- Participate in all aspects of camp (including early morning swims whilst in camp) and be where they meant to be at all times,
- Respect other people's property
- Enjoy the atmosphere of the community group
- Respect the safety of others

2. Campers are expected not to

- Behave inappropriately, including bullying, teasing, harassment or acts of aggression
- Vandalize or intentionally damage any camp property or leader property and/or equipment
- Steal or borrow without consent another's belongings
- Tamper with any safety devices or operations equipment, including but not limited to vehicles, craft, fire extinguishers, smoke detectors, emergency equipment and tools.
- Leave the camp boundaries without a leader.

Camp Icthus has a zero tolerance for sexual harassment. Harassment can take many forms, including:

- Physical contact, like grabbing, pinching, inappropriate touching, or unwanted kissing
- Sexual name calling
- Making sexual jokes or gestures

Campers that do not behave as expected MAY be sent home based on the severity of the breach. If that is the case, NO refund or credit will be issued.

3. Dress Code

All campers are encouraged to use protective sunhats and sunscreen. It is requested that tee shirts or rash vests are worn for most water activities. Footwear MUST be worn at all times during camp activity.

DECLARATION

By signing, I recognise that I have read, understand and agree to the Camper Code of Conduct.

CAMPER Full Name: Signature: PARENT/GUARDIAN Full Name: Signature:

DECLARATION BY PARENT/GUARDIAN OF APPLICANT

I, the undersigned, am the parent or guardian of the applicant named overleaf, and having checked the accuracy of all information provided, approve of this application. In doing so, I agree that Camp Icthus Inc, its officers and servants, shall be free of all responsibility whatsoever with respect to any accident or illness during the applicant's participation in any camp activity, including (but not exclusive to) bushwalking, canoeing, sailing, swimming, and overnight camping.

I understand that throughout the camping program minor injuries or ailments such as headaches, nausea, strains, sprains and scratches can occur. I have accurately indicated any allergies the application has to medications that can be purchased without prescription and have also indicated whether leaders have permission to administer these products according to the recommended dosage. I understand that where these remedies are deemed unsuitable in treating the condition, camp leaders will either contact with me or seek professional medical or pharmacist assistance. I give permission for any necessary medical attention for the application to be obtained and agree to meet any additional medical expenses incurred.

I declare that the applicant has been in good health and agree to advise Camp Icthus Inc. immediately into the event of the application contracting an ailment that could be detrimental to the health of other participants.

I further declare that I have advised Camp Icthus Inc. of any behavioural issues that could affect either the applicant's participation in the program, or impact on other participants in the program.

I understand and agree that should Camp Icthus Inc. deem it necessary, for any reason, to return the applicant home at any time during the program, I will accept this and make necessary arrangements.

I understand Camp Icthus will only chaperone the applicant whilst travelling to and from Camp Icthus on V-line, parent and/or guardians will be responsible for the applicant after arrival at train stations.

Signed:

Date ___/___/___

Full Name:

Relationship to Applicant:

EMERGENCY CONTACT DETAILS

In the event of emergency, we will first attempt to contact the Primary Contact Parent/Guardian above. However, please nominate an additional person over the age of 18 who we can contact if they are unavailable.

Same as Secondary Contact

OR as below

Full Name:

Address:

Relationship to Applicant:

Mobile Phone:

Home/Work Phone:

2025 SUMMER CAMPING PROGRAM

Please retain this page for your own information



SENIOR CAMP: Friday 3rd January – Sunday 12th January 2025, ages 15-17 years

JUNIOR CAMP: Wednesday 15th January – Friday 24th January 2025, ages 12-14 years

<u>COST</u>

The cost of the camp is \$800. Please note due to significantly reduced train travel costs in Victoria there is no longer an additional charge for train travel. No GST is payable on the cost of the camping program.

Applications and a minimum deposit of \$150 (any amount over \$150 is also permitted), is due by Friday 15th November.

Applications and deposits will be acknowledged on receipt. You will be advised of the outcome of your application by Friday 29th November and receipts will be issued once full payment is received. Unsuccessful applicants will receive full refund of deposits paid.

Family Discount: For two or more children from the same immediate family, we offer a discounted fee. The discount is \$50 off the fee for each subsequent child from the same immediate family.

Payment by instalments: If you wish to discuss an alternative payment arrangement, please contact our Summer Camp Coordinator (contact details listen at the bottom of the page)

Subsidised fees: may be granted to those who genuinely find the full fee beyond their means. Limited funds are available for this purpose and the camper application should be completed in the normal manner. The application should include a written statement detailing the reasons for requesting financial assistance. All requests will be treated in the strictest confidence.

MOBILE PHONES AND ELECTRONIC DEVICES

The best Camp Icthus experiences occurs when participants immerse themselves fully in all activities and leave the 'real' world at home. Camp Icthus is also on a bush site and we undertake many activities that involve water, sand, and unpredictable environments. For these reasons we do not allow electronic games, music players, mobile phones or other electronic devices.

We recommend that campers do not bring their mobile phones to camp. However, we understand that campers may need to arrange transport to/from the train. Any mobile phones brought to camp MUST be handed in to camp leaders upon arrival and will be securely stored for the duration of camp. Mobile phones will be returned on the final day before leaving camp. If you wish to contact a camper during the program, the Camp Icthus phone number is 0403 080 881, and we are happy for you to call this number at any time. Campers will be allowed to use the camp phone if necessary, at leaders discretion.

APPLICATIONS AND PAYMENTS

Applicants will be advised of the receipt of their application by email. Outcomes will be advised by the Friday 29th November. Camp Icthus anticipates high demand for our Summer Camps in 2025. The order in which we receive applications may be one of the factors considered when deciding who receives a place on camp. Successful applicants will also be provided with details of train times and what to bring to camp. If you withdraw your application more than 14 days prior to the camp start date, a partial refund may be issued, dependent on the expenses already incurred by Camp Icthus Inc. If you withdraw less than 14 days from when the camp is due to commence, no refund will be issued. *Late applications will be considered if spaces are available.*

REQUESTS FOR FURTHER INFORMATION

Please contact our Summer Camps Coordinators Chris Forbes on 0421 915 571. Camp Icthus on 0403 080 881 or Icthus Secretary, Jill Forshaw on 0412 062 860 for more information.

Email: campicthus@gmail.com