

Appendix A

St Clair Surf Life Saving Club –Travel Agreement

Event	
Venue	
Travel dates	

Member Name:

St Clair SLSC expects that all team Members contribute to the success of the trip by co-operating fully with coaches and Team management in a responsible manner at all times. All team Members (and their parents if under 18 years) must read the Club Travel Policy and sign this Travel Agreement which incorporates the SLSNZ Code of Conduct and provide relevant medical information.

Travel Code of Conduct

- I understand that Team management has full authority in all matters pertaining to the trip and agree to co-operate fully with any team management requests;
- I agree not to use any unauthorised drugs or substances. I understand that the Club and Event organisers may conduct random drug testing;
- I understand the team has a strict no alcohol policy for anyone under 18 and that I must respect all members of the team and other surf life saving clubs and that there will be no partying or disturbing others at night;
- I will be quiet and respect the rights of teammates and others;
- I will be prompt and on time;
- I will follow cell phone usage guidelines;
- I will follow computer use guidelines including social media;
- I will respect all travel vehicles;
- I will follow the team travel dress code;
- I will use appropriate behaviour in public facilities;
- I will follow all curfews set by Team management;
- I will stay in my assigned accommodation;
- I understand the needs and wellbeing of the team come first;
- I understand that I will be liable for any costs relating to any damage or loss, including to accommodation or transportation vehicles;
- I understand the conditions of the trip in that I will be under the care of the Team management at all times. I understand that although all care is taken Team management take no responsibility for any accidents that may occur as a result of my unacceptable behavior; and
- I agree to follow the attached SLSNZ Code of Conduct at all times during the period of travel.

Medical Information

Please record below any disability, allergy or medical condition we should know about, including any medicine brought on the trip (and instructions for its use)

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Club Travel Policy

I have read and fully understand the Club Travel Policy.

Permission is hereby given <delete or add as appropriate>

- For me/ my child to attend the above event as part of a Club team.
- For me/ my child be transported alone with their coach/ (named other person).
- For my child to stay in accommodation with a (named) chaperone in the room.
- For my child to stay in a room with other children of the same age and gender.
- Team Management to arrange medical treatment for me/ my child if required for injury or illness.
- For my child to be allowed to go to public places as part of team activities, either with a chaperone or if 13 and over in groups of no less than three persons.
- For Team Management to discipline me/ my child in the event of unacceptable behavior including being sent home immediately at my own expense.

Member Signature	Parent Name (U18):	Parent Signature (U18):
Member Mobile:	Parent (1) mobile:	Parent (2) mobile:
Date:	Emergency Contact name: <i>(If different from parent or over 18)</i>	Emergency Contact phone:
Doctor Name:	Doctor Phone:	