

2025 Membership Form

To be completed by Young Person

| Programs | | | |
|--------------------------------|---|--|--|
| \square After School Drop in | \square Home School Group | | |
| ☐ Game Club | ☐ Young Yorgas | | |
| ☐ 17+ Drop In | ☐ Dungeons and Dragons & Duel (Card Club) | | |
| ☐ Mandurah Beats | | | |
| | | | |
| Young Person | | | |
| Full Name: | Date of Birth: | | |
| Address: | | | |
| | School: | | |
| Cultural Background: | | | |
| Gender: | Pronouns: | | |
| Email: | | | |
| Emergency Contacts | | | |
| Name: | Name: | | |
| Mobile: | Mobile: | | |
| Relationship: | Relationship: | | |





Positive Youth Culture Agreement

This agreement has been designed by young people for young people. It ensures that everyone can enjoy participating in our youth programs and events.

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| 1. | Show respect towards staff and peers |
|----|--|
| 2. | Show respect for the building and equipment, by using it appropriately e.g. computers, pool cues, video games etc. |
| 3. | Use kind and appropriate language |
| 4. | Keep your hands to yourself |
| 5. | Acknowledge when you are feeling angry or upset and take steps to prevent becoming verbally or physically aggressive. e.g. removing yourself from the situation, talking to a friend or staff member |
| 6. | Celebrate equality by welcoming everyone no matter their age, gender, race or sexual orientation etc. |
| 7. | Help to maintain a healthy environment by not smoking or being under the influence of drugs or alcohol |
| 8. | Respect others privacy by not filming or taking photos without permission |
| 9. | Keep everyone safe by not bringing in dangerous items or stolen goods |
| | derstand that if I don't uphold this agreement then I may be asked to leave the ram. |

Young Persons Signature: _____ Date: _____





Parent/Guardian Form

To be completed by Young Person

Please read this form carefully and do not hesitate to ask questions if you are unsure.

- ✓ Young people are required to uphold the *Positive Youth Culture Agreement*, which outlines expected behaviour. Any behaviour that is abusive or puts others at risk will not be tolerated and young people may be asked to leave. A ban will also be considered depending on severity of behaviour.
- ✓ Information disclosed by young people to staff will be kept confidential unless there is risk to the young person or others

Duty of Care

Staff are committed to ensuring that the programs we offer are safe and welcoming for all young people.

The City of Mandurah youth team do not have the authority to prevent young people leaving City programs. Staff do not take any responsibility for young people who leave a youth program and are no longer on the premises.

Support Needs

Staff cannot provide care beyond basic supervision and support. A support worker must be provided if a young person has specific needs. Staff do not administer medications or assist with medical issues.

Accident/Injury

In the event of a serious injury, an ambulance will be called. Parent/guardian will be notified immediately and will be required to meet any expenses incurred.

| Additional Information | d:aal/ | ا م مام، بم م | aciaal / why sical acoditions that staff acod to be accord |
|-----------------------------|------------|---------------|--|
| of? | medicai / | psychol | ogical / physical conditions that staff need to be aware |
| | Yes 🗆 | No 🗆 | |
| Medical condition | Yes 🗆 | No □_ | |
| Other Disability | Yes 🗆 | No 🗆 | |
| Support Worker | Yes 🗆 | No 🗆 | |
| If Yes please give details; | | | |
| | | | |
| | | | ······································ |
| Please provide accurate d | letails so | that staf | f can determine how to best support your child. |



We may call you to discuss further.



Parent/Guardian Consent

I acknowledge the City of Mandurah is not liable for any loss, damage or injury to property or person as a consequence of my, or my child's, participation in the program. I also acknowledge that I am liable for any damage to property or injury to another person caused by me or my child.

I also acknowledge that in the case of emergency, City staff will call an ambulance or other emergency service as needed for my child.

I understand these conditions and give consent for my child to participate in the selected activities.

| <u>Photo consent</u> - The City of Mandurah uses photos and videos of local people for the marketing, educational and reporting purposes. | | | | | |
|---|-------|------|--|--|--|
| I give permission for <i>photos/videos</i> be taken of my child for use as stated: | Yes 🗆 | No 🗆 | | | |
| Travel consent ➤ I give consent for my child to travel by vehicle with City of Mandurah Youth staff to offsite programs and activities: | Yes 🗆 | No 🗆 | | | |
| Participant (Young Person) Full Name: | | | | | |
| Parent/Guardian Full Name: | | | | | |
| Phone: Date: | | | | | |
| Parent/Guardian Signature: | | | | | |
| To get more information about upcoming youth events sign up to our newsletter be | у 📮 | | | | |

scanning the QR code or write your email here;

