|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Katherine | | | | | | | | | | |
| Fields marked with an asterisk (\*) are required. | | | | | | | | | | |
| Region and schedule details | | | | | | | | | | |
| **Choose preferred term**\* | | | | | | | | | | |
| **Term 2** | | Yes / No | **Term 3** | | | | | Yes / No | | |
| **Child details** | | | | | | | | | | |
| Full name\* |  | | | Date of birth\* | | |  | | | |
| **Any medical information or action plans we need to know about –** eg.allergies, medical conditions or medication your child may need to take regularly. This information helps us plan activities to be fun and inclusive. If needed, we may request additional information from you. | | | | | | | | | | |
|  | | | | | | | | | | |
| **Has your child been a junior ranger before**\* | | | | | | | | | Yes / No | |
| Guardian details | | | | | | | | | | |
| **Guardian 1**\* | | | | | | | | | | |
| Full name |  | | | | | | | | | |
| Email address |  | | | | **Phone** |  | | | | |
| Postal address |  | | | | | | | | | |
| **Guardian 2** | | | | | | | | | | |
| Full name |  | | | | | | | | | |
| Email address |  | | | | **Phone** |  | | | | |
| Postal address |  | | | | | | | | | |
| Choose emergency contact (mark X in one)\* | | | | | | | | | | |
| Guardian 1 | |  | Guardian 2 | | | | |  | | |
| Declaration | | | | | | | | | | |
| **We require a code of conduct and talent release form to be completed for all children in the junior ranger program. You will get these forms if your child is offered a placement in the program.** | | | | | | | | | | |
| I agree to complete a code of conduct and talent release form\* | | | | | | | | | | Yes / No |
| Privacy statement The Department of Environment, Parks and Water Security (DEPWS) is committed to safeguarding the confidentiality and privacy of the information that it manages, uses and discloses in accordance with the Information Privacy Principles (IPP) in the *Northern Territory Information Act 2002*, and where applicable, with the Australian Privacy Principles (APP) in the *Commonwealth Privacy Act 1988*.  To contact us with a privacy question, or if you need more information about our privacy policy, you can write to us at PO Box 496, Palmerston, NT 0831, or call the DEPWS Privacy Officer on 08 8999 4410 business days, 8am to 4:21pm. | | | | | | | | | | |
| End of form | | | | | | | | | | |