

## Ocean Youth Membership Application Pack



Memberships will not be processed without completed membership packs, payment and ID photographs.

Please tick to confirm that you have enclosed the following:

- Completed Membership Form
- Emailed a recent head shot for your online profile
- Payment of \$200. Payment can be made online. Cheques & money orders made payable to SEA LIFE Trust
- Signed contract of membership
- Signed confidentiality agreement

Ocean Youth shirts are not included in the membership cost.

Cost to purchase an Ocean Youth shirt is \$20.00. If you would like to purchase a shirt with your membership please select the option in the payment section.

### Ocean Youth Membership Form:

Please complete form and email to [info@sealifetrust.org.au](mailto:info@sealifetrust.org.au) or post to: SEA LIFE Trust, 1 – 5 Wheat Rd, Darling Harbour, 2000

Name: \_\_\_\_\_

Gender:      Male                       Female

DOB: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_

State: \_\_\_\_\_ P/Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mobile No: \_\_\_\_\_

Email Address (essential): \_\_\_\_\_

School: \_\_\_\_\_

As a member of Ocean Youth I will adhere to the policy of SEA LIFE and understand my membership can be terminated if I fail to do so.

I also am aware that transport to and from activities and events is up to me.

Memberships are non-refundable.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Mobile No: \_\_\_\_\_

## Ocean Youth Membership Application Pack



Medical History/Allergies/Special Requirements:

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### Photo Release:

My child can be photographed/filmed for public relations purposes and to promote the Ocean Youth Program: (circle)      Yes      No

### General Release:

I give permission for my child to participate in all aspects of SEA LIFE Trust's Ocean Youth Program.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### PAYMENT DETAILS:

The Ocean Youth program is \$200 per year. T-shirts are \$20. Caps are \$20.

T-Shirt: (circle) Yes    No    XSML    SML    MED    LGE (NB: T-shirts are in Adult Sizes)

Cap: (circle)      Yes    No

Payment can be made online. Go to [www.sealifetrust.org.au/oceanyouth](http://www.sealifetrust.org.au/oceanyouth) to make payment via Paypal.

Please make cheque & money orders payable to SEA LIFE Trust.

Memberships are non-refundable.

### Conditions of Membership

- You must be aged 13 to 18 years to be a member.
- This membership offer includes free entry for 12 months into SEA LIFE.
- As a member of OY it is important that you adhere to both SEA LIFE policy and ethics.
- Any breach of this will incur a warning system and possible elimination from the program.

Read the contract carefully and have both yourself and your parent/guardian sign it.

Please email a recent photo (head shot) with your membership form for your online profile.

### Ocean Youth Contract for Membership

Becoming an OY member, I understand that:

- Membership is for a 12 month period;
- Membership is non-refundable;



## Ocean Youth Membership Application Pack

- As a member of Ocean Youth I am a representative of SEA LIFE and SEA LIFE Trust and realise that I must adhere to SEA LIFE policy and animal ethics;
- Any breach of this will incur a warning system and possible elimination from the program;
- I will need to, at different times, work both independently and as a part of a team, always following directions from SEA LIFE Trust staff and supervisors;
- As an OY member I am entitled to visit SEA LIFE free of charge as long as I am a registered, current member. This entitlement does not include my family or friends;
- I realise some elements of the program may have restricted numbers due to resources and space;
- As an OY member it is my responsibility to regularly check the website for the latest OY information, including available activities during holidays and weekends;
- I will need an email address for contact purposes and to receive events and to participate in the online platform;
- It is my responsibility to provide the OY coordinators with an appropriate email address.

All OY related correspondence should be directed to the OY Coordinator from the OY member, not parents/guardians;

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

### **Parent/Guardian please read carefully, sign and date:**

As the parent/guardian of this OY member I am aware that they are applying for the Ocean Youth Program, and understand that:

- Transport to and from OY events and programs is up to the OY member;
- As the OY program develops there will be opportunities for my child to be involved in public education within SEA LIFE centres and the wider community,
- When possible all correspondence should be directed to the OY Coordinator, from my child (OY member) and not from me.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_



### **Ocean Youth Confidentiality Agreement:**

#### **Confidentiality of Information**

All information gained through your role as an OY concerning SEA LIFE or SEA LIFE Trust's operations, business, intellectual property, financial records, and/or employee information, whether obtained directly or indirectly, is to be regarded as confidential. Such information as may be received shall be treated in a strictly professional and confidential manner and not discussed outside the confines of the specific work area, or external to SEA LIFE and the SEA LIFE Trust

#### **Release of Information**

In your role as an OY member, you are not authorised to release information and/or communicate directly with the any third parties. In all instances, requests to release information and/or discuss issues related to SEA LIFE or SEA LIFE Trust are to be directed to the OY coordinators.

#### **Restrictions on Use of Imagery**

The following restrictions apply to photographic images and video material taken at as part of the Ocean Youth program. Specifically, OY members may not without prior approval from the OY coordinators:

- Seek to sell or derive a profit from any imagery taken at the aquaria;
- Commercially exploit the imagery in any way;
- Send or distribute images to any third parties or external agencies;
- Post imagery on networking or other websites (e.g. facebook);
- Publish images in any way;
- Take photographs or video of any behind-the-scenes work areas of the aquaria without permission/approval.

#### **OY Intellectual Property Generation**

Part of the OY program is about creating solutions to identified issues. All commercially viable products generated by OY as part of the OY program is owned by the applicant and the SEA LIFE Trust in a joint venture arrangement between the applicant and the SEA LIFE Trust where proceeds are shared equally. Proceeds generated by the sale of OY products or services generated as part of the OY program will in turn be re-invested into the Ocean Youth program.

I understand and have discussed the terms and conditions of this Confidentiality Agreement with my child:

## Ocean Youth Membership Application Pack



Signature of Parent /

Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

I understand and accept the terms and conditions of this Confidentiality Agreement.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

### Ocean Youth Medical Form

Applicant's Name: \_\_\_\_\_

Medicare Number: \_\_\_\_\_

Doctors Name: \_\_\_\_\_

Doctors Address: \_\_\_\_\_

Doctors Telephone: \_\_\_\_\_

List existing medical conditions or illnesses (include asthma, diabetes, epilepsy, allergies, etc) \_\_\_\_\_

Are there any conditions that the Education staff needs to be aware of to support your child in this program? YES / NO

Further details: \_\_\_\_\_

#### Consent to Medical Attention

Where the OY coordinators are unable to contact me, I authorise the OY coordinators to:

- Consent to my child receiving such medical or surgical attention as may be deemed necessary by a medical practitioner;
- Administer such first aid as the OY coordinators may judge to be reasonably necessary.

Signature of Parent / Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Name of Parent / Guardian: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Contact Email: \_\_\_\_\_