

TEEN SCHOOL HOLIDAY PROGRAM FORM

CHOOSE YOUR OWN ANTARCTIC ADVENTURE



Dates: 2 & 9 October 2026 **Time:** 10am–12.30pm

Location: Discovery Centre Workshop, National Museum of Australia

All activity materials provided. Food and drink not provided.

Participant details:

Full name

DOB

Address

Emergency contacts:

Full name

Relationship

Contact

Full name

Relationship

Contact

Health and support needs:

Does your child have any medical or other conditions that the Museum should be aware of (e.g. asthma, allergies, etc)?

Yes

No

If yes, provide details:

Please outline what first aid treatment or medical response may be required:

Does your child have any additional needs, or is there anything else that the Museum should be aware of?

Permissions:

I give permission for my child to independently sign themselves in and out of the program:

Yes

No

Only the following authorised persons may sign my child in and out:

During the Program, the Museum may take photos and videos which may be used for promotional or educational purposes on the Museum's website and social media. Do you and your child consent to their image being used?

Yes

No

Privacy notification: The personal information requested on this form is collected by the National Museum of Australia to enable your child's participation in the Program. The personal information will be used solely by the Museum for that purpose or directly related purposes in accordance with the Privacy Act 1988. You may contact the Museum for access and/or amendment of this information. For more information on how the Museum may collect and use personal information, please see the Museum's Privacy Policy: www.nma.gov.au/about/corporate/policies/privacy

TEEN SCHOOL HOLIDAY PROGRAM WAIVER AND RELEASE



I, the undersigned parent or legal guardian of the above-named participant, grant permission for my child to participate in the Teen School Holiday Program (Program) organised by the National Museum of Australia. In consideration of my child being permitted to participate in the Program, I hereby agree to the following terms and conditions:

1. To the full extent permitted by law, I hereby release, forever discharge and hold harmless the National Museum of Australia and its directors, officers, agents and employees (the Museum) from any liability, claims, demands and causes of action of whatever kind and nature, either in law or equity, arising out of my child's participation in, and performance of activities connected with, the Program.
2. I understand and acknowledge that my child's participation in the Program may involve certain risks, including but not limited to physical injury, illness, property damage or other unforeseen occurrences or accidents. I voluntarily assume all risks that may arise from my child's participation in the Program.
3. I recognise and acknowledge that the risk of harm to my child is significantly increased when my child does not follow Museum staff instructions or where I have failed to provide all necessary information in relation to my child's participation in the Program. I have explained to my child the importance of following instructions of Museum staff and staying within Museum premises during the Program.
4. I agree that the Museum or Museum staff are not responsible for theft of clothing or valuables during my child's involvement in this Program.
5. I have advised the Museum of any medical conditions and/or particular needs which may affect my child's ability to participate in the Program.
6. In the event of an emergency, I authorise the Museum to obtain medical treatment for my child if necessary. I understand the Museum will make reasonable efforts to contact the emergency contact provided before administering medical treatment, but in the event that it is unable to do so, I consent to my child receiving such treatment.
7. I acknowledge that my child may be required to leave the Program if, at any time, the child's behaviour is disruptive, inappropriate, or otherwise unacceptable to the Museum, or if the child does not follow the instructions of Museum staff.
8. Unless I have given permission for my child to self sign-out, at the conclusion of the Program, or at any time if notified by the Museum that my child is required to leave the Program, I will ensure my child is collected from the Museum's premises promptly by an authorised person.
9. Where I have given permission for my child to sign themselves in and out of the program, I accept full responsibility for their safety before sign-in and immediately following sign-out.
10. I understand that photographs or videos may be taken during the Program, and unless I have advised the Museum otherwise, I grant permission for my child's image to be used for promotional or educational purposes by the Museum.
11. I have read this waiver and release and fully understand its terms. I voluntarily agree to its terms and acknowledge all information I have provided is correct.

Name of parent or legal guardian
(must be over 18 years)

Signature

Date