



Adelaide Youth Orchestras

2012 ADYO MEMBERSHIP APPLICATION FORM

All information written on this form will remain confidential at all times.

1. ORCHESTRA AND INSTRUMENT

Please write which instrument(s) you/your child plays and write which orchestra they'll be joining:

INSTRUMENT: _____

ORCHESTRA: _____

2. ADYO MEMBER'S DETAILS

Please note that all personal details will be treated as confidential as covered by our Privacy Policy.

FIRST NAME: _____

LAST NAME: _____

DATE OF BIRTH: _____

AGE on 31/12/12: _____

POSTAL ADDRESS: _____

SUBURB: _____

STATE: _____ POSTCODE: _____

HOME PHONE NO: _____ MOBILE PHONE NO: _____

EMAIL ADDRESS: _____

AdSI /AYS T-SHIRT

T-shirts are only worn by Adelaide Youth Strings and Adelaide Youth Strings

Do you need an AdYO t-shirt? YES NO

Please nominate the required size

Child 8 Child 10 Child 12 Adult Small Adult Medium Adult Large

3. ADYO PARENT/GUARDIAN / NEXT OF KIN CONTACT DETAILS

Please note that these details will only be used for correspondence or in the event of a Medical Emergency to contact a Parent or Guardian of the Member.

MOTHER'S / GUARDIAN'S NAME: _____

MOTHER'S/ GUARDIAN'S ADDRESS: _____

(if different from member's)

SUBURB: _____ STATE: _____ POSTCODE: _____

HOME PHONE NO: _____ MOBILE PHONE NO: _____

EMAIL: _____

NAME & PHONE NO OF MOTHER'S WORK PLACE: _____

FATHER'S / GUARDIAN'S NAME: _____

FATHER'S/ GUARDIAN'S ADDRESS: _____
(if different from member's)

SUBURB: _____ STATE: _____ POSTCODE: _____

HOME PHONE NO: _____ MOBILE PHONE NO: _____

EMAIL: _____

NAME & PHONE NO OF FATHER'S WORK PLACE: _____

NEXT-OF-KIN

If your parent isn't your next of kin (mostly if you're an adult), please include their details below.

NEXT OF KIN'S NAME: _____

RELATIONSHIP TO YOU: _____

PHONE NO: _____

4. ADYO MEMBER'S MEDICAL DETAILS

This section of questions relates to you, the member. Please ensure all sections are completed with accurate and current information. Failure to complete could lead us to be unable to properly treat you.

Medicare No. (inc personal digit) _____

Private Medical Insurance

If YES, Fund and Policy No. _____

Ambulance Cover: Y / N.

If YES, Policy No. _____

Doctor's Name: _____ Phone: _____

Dentist's Name: _____ Phone: _____

Are there any pastoral, cultural or religious issues that may affect participation or medical treatment? If YES please write, or attach details and necessary procedures to be followed: YES / NO

Have you suffered from any illness or injury within the last 3 months?

If YES, please detail.

YES / NO

Do you have Asthma? IF YES please complete the following

YES / NO

Triggers _____

Usual Symptoms _____

Prevention medication _____

Reliever medication _____

Please select ONE preferred treatment plan

AdYO's Asthma Policy	YES/NO	Alternative Plan	YES/NO
<p>Step 1: Sit person upright and stay calm</p> <p>Step 2: Give 4 separate puffs of a blue reliever (Aiomir, Asmol, Bricanyl or Ventolin). The medication is best taken one puff at a time via a spacer device. Take 4 breaths from the spacer after each puff of the medication.</p> <p>Step 3: Wait 4 minutes.</p> <p>Step 4: If little or no improvement , repeat steps 2 and 3. If still no improvement, call an ambulance (000), state that "a student is having an asthma attack". Continuously repeat steps 2 and 3 while waiting..</p>		<p>Please write below, or attach, details of dosages, method and frequency. You will need to supply all medication and equipment. Note that access to power may be infrequent</p>	

Do you suffer any other condition that may affect full participation, or safe management (eg diabetes, epilepsy, heart condition....)? If yes, please supply details, medication, name and contact number of doctor treating condition.

YES/NO

Do you suffer from environmental or medical drug-related allergies? If YES please write, or attach, details describing triggers, reactions and normal treatment:

YES / NO

<u>Type of allergy</u>	<u>Triggers and reactions:</u>	<u>Treatment:</u>

Has your child had a tetanus booster? If yes, please state year of last booster:

YES / NO

Prescription and Restricted Medicines

Please list medicine and dosage details of medicines you take. If required at rehearsals, please bring them with you. If assistance is required, please ask your orchestral manager to assist you.

Medicine	Dosage details

Non-Prescription Medications.

The following may be held by staff for relief of minor ailments.

Nurofen (Aspirin based)

Telfast (anti-histamine)

Cold/Flu medication

Paracetamol

Claratyne (anti-histamine)

Strepsils

Stingose

Eyedrops

Please tick ONE of the three options below

- All medicines listed above may be administered when necessary
- No medicines listed above may be administered
- All medicines listed above may be administered when necessary, EXCEPT for the following

5. SCHOOL / UNIVERSITY / WORKPLACE MEMBER INFORMATION

NAME OF INSTITUTION: _____

NAME OF CLASSROOM MUSIC TEACHER: _____

INSTITUTION ADDRESS: _____

PHONE NO: _____ CURRENT YEAR LEVEL: _____

6. INSTRUMENTAL TEACHER'S DETAILS

NAME OF TEACHER: _____

ADDRESS: _____

WORK PHONE NO: _____ MOBILE PHONE NO: _____

EMAIL ADDRESS: _____

Do you have lessons: PRIVATELY AT SCHOOL AT UNIVERSITY
(Please tick)

7. PRIVACY STATEMENT

All information collected in this Membership Form shall be treated, used and stored in accordance with all applicable Privacy Laws in Australia. We will only use your personal information for correspondence purposes and to contact you in the event of an emergency. We will treat all personal information collected from you as confidential and shall not disclose to any third parties, unless required to do so by law. Your personal details will be added to our AdYO Membership database and you may, from time to time, receive marketing or

promotional materials sent to you through postal or electronic means, unless you advise us otherwise in writing.

8. TERMS AND CONDITIONS OF MEMBERSHIP

In signing this Application for Membership form, I acknowledge and consent to the following as it applies to me/my child for the duration of the 2012 Membership season:

- Compliance with the AdYO Code of Conduct (as below) is a condition of this Membership and repeated failure to abide by it may result in termination of Membership.
- I authorise the staff in charge to consent to my child receiving such medical treatment as deemed necessary in an emergency, including blood transfusion and administration of an anaesthetic if it is impracticable to communicate with me. I agree to pay all medical/dental expenses and transport costs, incurred on behalf of my child, as a result of any condition or injury sustained by my child.
- Each Member is responsible for carrying with them at all times all appropriate and necessary medication as required by them while in attendance at all AdYO rehearsals, auditions or performances. AdYO will not be held liable for any Member who fails to comply with this term.
- I acknowledge that from time to time I/my child may be photographed, either individually or in a group, and may be audio recorded or filmed in an interview or playing a musical instrument individually or in concert(s) with the orchestra(s).
- All photography, audio recording or filming of any or all Members shall be for non-commercial purposes only, however some photography, audio recording and filming may be used in marketing and publicity for AdYO and I/my child shall receive no financial payment for the use of such photographs, audio recordings or film.
- I consent and acknowledge to AdYO using and storing my personal information in the manner so described in the Privacy Statement.
- I will promptly notify AdYO of any and all changes to the Membership information as supplied in this form, if and when they occur.

I hereby consent to the above terms and conditions of Membership.

Signed:

_____ **Parent / Guardian (if Member is under 18 years)**

_____ **Member**

Date:

9. CODE OF CONDUCT

To ensure that the Adelaide Youth Orchestras reach their full potential and as a courtesy to other orchestra members and AdYO staff, we ask all members to comply with this Code of Conduct.

Attendance and Punctuality

All orchestral players make an important contribution to rehearsals, and therefore members are expected to attend all rehearsals. Legitimate reasons for missing a rehearsal (or part thereof) include exams, illness and compulsory school commitments. Permission to miss rehearsal must be sought from the orchestra manager **at least 2 weeks in advance in writing** (using online form), except in the case of illness. Other reasons for missing rehearsal will be at the discretion of the orchestra manager and conductor.

It is important that members arrive 15 minutes before the start of rehearsals so that they are ready to begin rehearsing on time. Orchestra managers will be at the venues 30 minutes before the start of rehearsals. After

the rehearsal please make sure that your transport is prompt; it is unreasonable to expect AdYO staff to provide supervision for more than 15 minutes after the rehearsal ends.

I have read and understood the Attendance & Punctuality requirements.

Orchestra Etiquette

- **Respect for others:** We expect members of AdYO to behave in a way that is tolerant and respectful of other Members and their property, parents and staff of AdYO. Harassment of any kind will not be tolerated.
- **Respect for property:** The rehearsal venues that we use are borrowed; please respect property such as chairs and music stands, be responsible for taking home all your belongings, and please do not litter.
- **Practice:** We expect that AdYO members prepare their part to the best of their ability between rehearsals through private practise so that time is not lost during rehearsals due to wrong notes, etc.
- Bring a working instrument, your music and a pencil to all rehearsals
- Pay attention to the conductor at all times and do not socialise while the rehearsal is in progress
- Seating order is at the discretion of the conductor and may be changed or rotated throughout the year

I have read and understood the Orchestral Etiquette requirements.

Concert Attire

Adelaide Youth Orchestra

- Black Shirt
- Black Long Dress Pants or Black Skirt (Below the knee with black stockings/tights)
- Black Socks or Stockings
- Black Dress Shoes (clean and polished)

Adelaide Youth Sinfonia and Adelaide Youth Strings

- AdYO t-shirt (supplied by AdYO)
- Black Long Dress Pants or Black Skirt (Below the knee with black stockings/tights)
- Black Socks or Stockings
- Black Dress Shoes (clean and polished)

Navy blue and grey are not black!

I have read and understood the Concert Attire requirements.

Consequences of Contravention

Failure to comply with this Code of Conduct will result in significant consequences for an offending Member, which may include any of the following:

- asking a member to leave or not participate in a rehearsal or performance on a particular occasion;
- arranging meetings between a Member and AdYO staff;
- arranging meetings between a Member, their parents and AdYO staff
- giving written warnings to a Member and their parents; and
- termination of Membership at the complete discretion of AdYO (in cases of severe or repeated contravention of this Code of Conduct).
- any member whose Membership is terminated shall not be entitled a refund of their membership fees for the duration of the 2011 season.

I have read and understood the consequences of contravention.

Please return completed form no later than Friday 13 January 2012 to:

The Adelaide Youth Orchestras Inc
GPO Box 2121 Adelaide SA 5001