



YOUTH EXCHANGE MULTIPLE DISTRICT 201

LIONS CLUBS INTERNATIONAL

Australia, Papua New Guinea and Norfolk Island

Please complete this form on-line. The information cannot be saved. Please print 4 copies once completed.

Please attach a letter to "Dear Host Family" to this Application

Identity No.

Please affix Passport size Photograph on each Application Form

SECTION A. Application & Indemnity Form

PROGRAM PREFERENCE: 1st Preference:

2nd Preference: 3rd Preference:

Surname: Given Name: Known as:

Street Address:

City/Town: State: Post Code:

Phone (area code) Fax (area Code): Mobile:

Email:

Sex: M F Date of birth: .../.../19 Australian Passport: Y N Do you smoke? Y N

Hobbies and other interests:

Have you been overseas?: Y N If yes indicate year and country:

Languages spoken other than English: Level: Fair Good

Present field of Study or Occupation: Secondary Tertiary Working Field:

Please state any physical handicaps/allergies INCLUDING asthma:

APPLICANT'S FAMILY DATA

Father's name: Lion: (Please Cross if yes)

Mother's name: Lion: (Please Cross if yes)

Parent's address:

State: Post Code: Phone (area code): (H)..... (B)

Mobile: Email Address:

HAVE YOU HOSTED LIONS YOUTH EXCHANGE PREVIOUSLY: Y/N. IF NO, WHEN CAN YOU HOST

(Period of Hosting is for 3 weeks during July – August and December – January)

NOMINATING CLUB DATA

Nominating Club and Address

..... District 201

Lions Club Contact: Name Phone (area code): (H)

(B) Email:

How was the applicant selected and approved?: Interview Youth of the Year Leo Club Other

Signature of Club President: Date:

Signature of District Chairman: Date:

Signature of M.D. Program Chairman: Date:

M.D.201 COMMITTEE USE ONLY

Deposit: Bank: Cheque No.: Date Rec'd.:

Balance: Bank: Cheque No.: Date Rec'd.:

PLEASE RETURN FOUR (4) ORIGINALS OF THIS FORM TO YOUR LIONS CLUB PRESIDENT WITH A CHEQUE MADE PAYABLE TO 'MD 201 COUNCIL FOR \$500. NOTE: ALL QUESTIONS MUST BE ANSWERED IN SECTION (A) AND (D) AND EITHER (B) OR (C). THIS IS MANDATORY

(To be completed where Applicant is Under 18 Y.O.)

With the affixed signatures, I/We Full Names

of Address

the Parent(s) or Guardian(s) of my/our son/daughter/ward Full Names

Born on/...../..... give permission for him/her:

to travel and remain at an approved place and for an approved period of living in Lions or Lions approved homes. I/We agree to relieve every member of the nominating Lions Club and the host Lions Club, the Host Family, Lions Districts of both the Nominating and Host Clubs and Lions Clubs International of every financial or other responsibility in the case of his/her illness or death, except that furnished by the insurance policy provided for the particular Youth Exchange Program so far as may be applicable and to indemnify each of them in respect of any expense incurred.

I/We further agree to indemnify every Lions Club member of the Nominating Club, the Host Club, the Host Family, the Lions District for both the Nominating and Host Clubs and Lions Clubs International against claims for additional costs incurred by my/our son/daughter/ward failing to complete the relevant Youth Exchange Program.

I/We also agree that my/our son/daughter/ward will not be permitted to drive a motor vehicle while away under this Youth Exchange Program. Our son/daughter/ward will return directly to our home at the completion of the exchange. I/We acknowledge that my/our son/daughter/ward shall abide by the rules and regulations applying to the Youth Exchange Program such rules and regulations being set out on the schedule hereto.

I/We have further agreed that the guidelines as stated for participating youth in the MD201 Youth Exchange Manual will be complied with by me/us and by my/our son/daughter/ward. In the case of any violation of Guidelines I/We understand that my/our son/daughter/ward will be returned to his/her home at my/our expense.

I/We the parent(s) or guardian(s) give legal consent for a Lion of the Club hosting my/our son/daughter/ward to take immediate action in authorising the provision of surgical or medical treatment when time or distance does not permit the obtaining of consent by me/us.

The Exchange youth must abide by the following rules:

- 1. To only travel according to the program arranged by the Youth Exchange Committee of Multiple District 201 LCI (MD201)
- 2. Not to be permitted to engage in the following sports or activities:

Competitive Football, motorcycling, trail-bike riding, mountaineering or rock-climbing (involving the use of ropes and tackle), bungee jumping, white/black water rafting, ballooning, hang/kite/glider flying, parachuting, paragliding, abseiling, hunting, competitive skiing, competitive ice and snow sports and participating in speed or endurance tests or races of any kind, polo playing, or scuba diving unless you hold an Open Water Diving Certificate or are diving with a qualified instructor and then only to a depth not greater than 30m..

I/We also acknowledge the rights of Lions Australia to cancel or postpone the program, at its sole discretion, should it determine that such action is necessary for the safety of participants.

I/We further acknowledge that in such an event the airfares and other expenses paid may be forfeited to the carrier and that Lions Australia cannot accept any responsibility for any loss incurred.

Signature(s) Date:

Witness

I, the applicant agree and accept the above conditions:

Signature of Applicant Date:

Witness

PARENTS' CONSENT FOR USE OF PHOTO & GIVEN NAME IN PUBLICITY

With the affixed signature/s, I/We as Parent(s) or Guardian(s) of the above child agree to the use of photograph(s) and one given name for publicizing the Lions Youth Exchange program, for a period of 12 (twelve) months from the date of his/her return to Australia after participating in a Lions Youth Exchange Program.

.....

(To be completed where Applicant is 18 Y.O. or over)

With the affixed signature, I of

Full Name

.....

Address

AGREE:

To travel and remain at an approved place and for an approved period of living in Lions or Lions approved homes. I further agree to relieve every member of the nominating Lions Club and the host Lions Club, the Host Family, Lions Districts of both the Nominating and Host Clubs and Lions Clubs International of every financial or other responsibility in the case of my illness or death, except that furnished by the insurance policy provided for the particular Youth Exchange Program so far as may be applicable and to indemnify each of them in respect of any expense incurred;

I further agree to indemnify every Lions Club member of the Nominating Club, the Host Club, the Host Family, the Lions District for both the Nominating and Host Clubs and Lions Clubs International against claims for additional costs incurred by my failing to complete the relevant Youth Exchange Program;

I also agree that I will not be permitted to drive a motor vehicle while away under this Youth Exchange Program. I will return directly to Australia at the completion of the exchange. I acknowledge that I shall abide by the rules and regulations applying to the Youth Exchange Program such rules and regulations being set out on the schedule hereto;

I have further agreed that the guidelines as stated for participating youth in the MD201 Youth Exchange Manual will be complied with by me. In the case of any violation of Guidelines I understand that I will be returned to my home at my expense;

I give legal consent for a Lion of the Club hosting me to take immediate action in authorizing the provision of surgical or medical treatment when time or distance does not permit the obtaining of consent by me;

I must abide by the following rules:

1. To only travel according to the program arranged by the Youth Exchange Committee of Multiple District 201 LCI (MD201)
2. Not to be permitted to engage in the following sports or activities:
Competitive Football, motorcycling, trail-bike riding, mountaineering or rock-climbing (involving the use of ropes and tackle), bungee jumping, white/black water rafting, ballooning, hang/kite/glider flying, parachuting, paragliding, abseiling, hunting, competitive skiing, competitive ice and snow sports and participating in speed or endurance tests or races of any kind, polo playing, or scuba diving unless you hold an Open Water Diving Certificate or are diving with a qualified instructor and then only to a depth not greater than 30m.

I also acknowledge the rights of Lions Australia to cancel or postpone the program, at its sole discretion, should it determine that such action is necessary for the safety of participants.

I further acknowledge that in such an event the airfares and other expenses paid may be forfeited to the carrier and that Lions Australia cannot accept any responsibility for any loss incurred.

I, the applicant agree and accept the above conditions:

Signature of Applicant **Date:**

Witness

CONSENT FOR USE OF PHOTO & GIVEN NAME IN PUBLICITY

With the affixed signature, I agree to the use of photograph(s) and one of my given names for publicising the Lions Youth Exchange program, for a period of 12 (twelve) months from the date of my return to Australia after participating in a Lions Youth Exchange Program.

Signature of Applicant **Date:**

Witness

SECTION D

Medical Certificate

(THIS SECTION MUST BE COMPLETED FOR ALL APPLICANTS)

The following information is important, please answer all the questions.

Any previous serious illness:.....

Special Diets (if any):.....

Signature of Applicant:

I have this day examined: (name) of

..... (address) and found him/her to be in good health and enjoying full working capacity. He/she is physically and mentally able to carry on an intensive Program of travel away from home.

(if applicable) I further certify that he/she is suffering from the following medical conditions:

.....

.....

I also further certify that he/she has received the following vaccinations:

Measles Y/N Date /.../.....

Tetanus Y/N Date /.../

Typhoid Y/N Date / .../

And that his/her Blood Type is

Dated Signature of Examining Physician

Address.....Post Code

Physician's Stamp

Privacy Statement: In order to conduct the Youth Exchange Program it is necessary to obtain particulars of each applicant including his or her name, address, age and medical status. Such particulars will be used only for such purpose and will be kept confidential at all times. The particulars will be destroyed as soon as practicable after the conclusion of the exchange.