

PARTICIPANT REGISTRATION FORM REALISE THE DREAM

Please complete this form only if your nomination was successful and you have been advised that you have been selected to attend Realise the Dream by a Royal Society of New Zealand representative.

Please ensure that this form is completed in full.

The completed form needs to be sent no later than 12 November 2010. Send back in the stamped addressed envelope provided

Participant Details					
First Name(s)			Surname/Family Name		
Address:					
City:		Country:		Postal Code:	
School:				Yr:	
Age:		D.O.B		Male / Female	Nationality:
Home Ph:			Participant Cellular Phone:		
Personal Email Address:					
Family Email Address:					
Are you are New Zealand Citizen or Permanent Resident?			Yes	(please circle)	No
Passport number if you have one:					

Contact Person Details in the event of an emergency				
Contact Person(s) 1 (normal parent or guardian)	Name (s)			
	Relationship:		Mobile:	
	Daytime Tel:		Evening Tel:	
	Fax:		Email:	
Contact Person(s) 2 (other parent, relative, or close friend for emergency contact)	Name (s)			
	Relationship:		Mobile:	
	Daytime Tel:		Evening Tel:	

Confidential Health Information

PRIVACY INFORMATION: The information supplied on this form will be used to assist the Director and advisors at Realise the Dream in risk management planning as well as medical personnel in the event of a sudden illness or injury. It will not be disclosed to anyone else. Please complete this form fully and accurately and sign and date at the bottom of the form.

Student's Full Name

Student's Age

Student's Gender

Medical Conditions

Please tick if your son/daughter has any of the following

<input type="checkbox"/> Migraine	<input type="checkbox"/> Epilepsy	<input type="checkbox"/> Asthma	<input type="checkbox"/> Diabetes	<input type="checkbox"/> Travel Sickness	<input type="checkbox"/> Fits of any type
<input type="checkbox"/> Chronic Nose bleeds	<input type="checkbox"/> Heart Condition	<input type="checkbox"/> Dizzy spells	<input type="checkbox"/> Colour blindness	<input type="checkbox"/> Sleepwalking	<input type="checkbox"/> Bedwetting

Please list any other medical conditions

Please list any recent injuries or illnesses:

Please give details of any medications currently being used or carried for use if needed (include dosage details)

Condition medication is for:

Name of medication	Dosage and time/s to be taken		
Are you allergic to any of the following	Yes	No	What treatment is required?
Prescription Medicine	<input type="checkbox"/>	<input type="checkbox"/>	
Food	<input type="checkbox"/>	<input type="checkbox"/>	
Insect bites/stings	<input type="checkbox"/>	<input type="checkbox"/>	
Other Allergies	<input type="checkbox"/>	<input type="checkbox"/>	

Date of last tetanus injection?

We sometimes administer Paracetamol as pain/flu medication. May your child be given this if necessary? Yes No

If no, please state what you would prefer us to use:

Please state if you or your child has been in contact with any contagious or infectious diseases within the two months prior to Realise the Dream. Please notify us if this changes.

Please outline any other issues you wish the Director/support staff to be aware of including any special needs; cultural practices; anxiety about heights/darkness/small spaces/water; behavioural, psychological or emotional problems etc.

Dietary Requirements

Vegetarian

Other, please specify

Disclosure of Risk, Risk Management Information and Release of Liability

Risk and Risk Management & Release of Liability

The Royal Society is committed to running a safe programme at Realise the Dream. However risk cannot be completely eliminated.

Please understand that the Royal Society will identify any foreseeable risks or hazards and implement correct management procedures to isolate or minimize those hazards.

Furthermore the student and the student's parents or legal guardian indemnifies and absolves the Royal Society of New Zealand and any support staff at Realise the Dream from all liability, in contract or in law, which may arise as a result of a student participant's involvement at Realise the Dream, or as a result of any action or inaction by another students in the programme or third party.

Declarations (To be completed by a parent of guardian of participants and participants also)

Permission, Acknowledgement of Risk and Release of Liability

I have read and understood the statement above regarding risk management and release of liability and agree to allow my child (name) _____ to participate at Realise the Dream.

Photo/Media Release/website material

Realise the Dream a prestigious national event which rewards and celebrates students. It is important to consider that an event such as this creates publicity, through media releases, television, radio and websites and Royal Society newsletters.

1. The Royal Society of New Zealand is an independent organization and in the interest of safety and security requires parent/guardian permission for the publishing of children's names on media releases, website and sponsor related media.
2. The Royal Society thinks it is important to celebrate student achievement, but is aware of the potential risks when material is published on a global information system such as the Internet.

Please indicate your wishing by ticking 'yes' or 'no' what you are happy to appear in media releases or website material.

Full Name Yes <input type="checkbox"/> No <input type="checkbox"/>	School Name Yes <input type="checkbox"/> No <input type="checkbox"/>	Individual Photograph Yes <input type="checkbox"/> No <input type="checkbox"/>	Written work Yes <input type="checkbox"/> No <input type="checkbox"/>
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Name of Participant: _____ Signature: _____

Name of Parent: _____ Signature: _____

Date: _____ Date: _____

Emergency Medical Treatment

I have completed the details on the health information form carefully and accurately. I agree that the Royal Society of New Zealand staff may seek medical treatment for me *or* (my son/daughter) if in their opinion it is necessary or an emergency. The costs of any such treatment will be recovered in full from the parent of legal guardian of the participant.

Name of Participant: _____ Signature: _____

Name of Parent: _____ Signature: _____

Date: _____ Date: _____

Rules and Guidelines while attending Realise the Dream

For the smooth, efficient and safe operation of Realise the Dream a code of behaviour is required of those students attending. This is not designed to restrict individual students unduly, but to form a culture and a climate at Realise the Dream based on self responsibility and care. The best rule is, "to have respect for oneself and for others"

If there are things that you are unsure of or do not understand then please talk to the Director of Realise the Dream.

Rules

- While attending Realise the Dream you must listen and follow the instructions of the support staff.
- You are expected to be courteous at all times to staff, students and guest presenters.
- Students must stay within the Weir House grounds at all times and must not go outside the accommodation facility without the permission from senior support staff at Realise the Dream.
- Students are not permitted to visit rooms of the opposite sex on their own. There are two common rooms available for socialising.
- Cell phones are to be turned off while attending lectures or other visits.
- All students are expected to fully participate in the programme with the only exception being if the student is unwell.

Alcohol, Illegal Drugs, Smoking

- **No alcohol is to be consumed by students attending Realise the Dream**
- **Illegal drugs are forbidden to be taken by students at Realise the Dream**
- **Smoking is forbidden by students attending Realise the Dream.**

I agree to abide by the rules above:

Name of participant:

Signature:

Parent/Guardian Responsibilities

Parents or Legal Guardians remain responsible for the action of their child and agree to remain available to communicate with the Director of Realise the Dream to discuss issues as they may occur.

Parents remain liable for any financial debt incurred by the student during their course of stay at Realise the Dream, this includes but is not limited to damage to or loss of property belonging to or rented by Realise the Dream, damage to the personal effects of selves or others, fines or legal costs, the cost of equipment which must be rented or purchased to ensure the student is adequately equipped to participate in the programme, cost of additional expenses incurred by Realise the Dream because of undisclosed special needs or poor behaviour.

Breaches of the rules are serious and will be dealt with by the senior support staff. The Royal Society reserves the right to send students back home if required. In each case the parents shall be responsible for the extra costs of supervision, accommodation and repatriation if needed.

Repeated behaviour outside the guidelines of Realise the Dream, or behaviour that is not compatible with the aims and objectives of Realise the Dream will be treated as a breach of the rules and dealt with as above.

I take full responsibility of my child's actions while at Realise the Dream and agree to my child being sent home for misbehaviour if deemed necessary.

Name of Parent/Guardian:

Signature:

Date:

What is the title of your project:

What are your hobbies?

Can you play a musical instrument?

Yes No

If yes, what do you play?

Can you sing or are you involved in a choir or group?

Yes No

The future!

You may not have thought about this but what do you see yourself doing when you leave school?

What do you think you would like to do as a career?

A1 poster guidelines

Realise the Dream is a prestigious event and it is important that the posters you prepare about your research looks professional.

All participants need to design their poster electronically.

Preparing your poster electronically may be a challenge for some of you and you may have to seek help.

Once you have sent an electronic version of your poster the Royal Society will organise to have this printed on to A1 and laminated. So whatever program you decide to use to design your poster in, make sure the page set up is A1 size (594mm width x 841mm height). You have the complete space of an A1 size to prepare your poster and so you can use background colour or designs if you wish. Most of the students last year used Power Point to prepare their poster.

Once you have designed your poster then please either send it electronically to Debbie.woodhall@rsnz.org or copy it on to a CD and courier this to Debbie Woodhall, Royal Society of New Zealand, 4 Halswell Street, Thorndon, Wellington. **This needs to be received no later than 29 November.**

The Royal Society will organise to have it printed by a professional company on to an A1 size poster and have it laminated. It will be available to show to the judges and so please make sure the CD is with us by the date above.

We will also print a copy of the poster for you to keep.

Guidelines for preparing electronic poster

1. Page set-up A1
2. Font should be Arial
3. Font size needs to be 14-16
4. Photographs and pictures will need to be at least 300 dpi
5. You may include graphs, photographs, colour, background colour or designs.
6. You can be creative
7. Give your research a heading or title on the poster.
8. The poster is to demonstrate a summary of what you have researched and so you should include a hypothesis or a need; the process; the results; conclusion and mention any help that you received;
9. It is important that when the general public read your poster that they are able to understand what you have researched.
10. Examples of some posters that have been designed in the past are also on the website.
www.realisethedream.org.nz
11. Do not include your name, school or age on your poster.