

ENROLMENT FORM

Please complete all sections and return to:

enrol@outwardbound.co.nz

PO Box 25274, Wellington 6140

Fax: +64 472 8059

PERSONAL DETAILS

FULL NAME

DATE OF BIRTH (DD/MM/YY)

AGE

I IDENTIFY MY GENDER AS:

MY PREFERRED PRONOUNS ARE:

What words would you like us to use when not using your name, such as; he, she, they etc.

ETHNICITY

CITIZENSHIP/RESIDENCY

NZ Citizen/Resident

Other

Please note, additional fees apply for all non NZ Citizens/Residents: \$1000 for 21 day courses, \$500 for 8 day courses. Proof required for NZ Citizens/Residents not currently residing in New Zealand,

CULTURAL & RELIGIOUS REQUIREMENTS

Do you have any cultural and/or religious requirements?

Yes

No

If yes, please describe these requirements

POSTAL ADDRESS

PRIMARY CONTACT NUMBER

EMAIL

YOUR ORGANISATION AND JOB TITLE

YOUR MANAGER'S NAME

YOUR MANAGER'S EMAIL ADDRESS

YOUR MANAGER'S CONTACT NUMBER

EMERGENCY CONTACT

Please note: your emergency contact must reside in New Zealand

FULL NAME

POSTAL ADDRESS

Tick here if same as your own

PRIMARY CONTACT NUMBER

SECONDARY CONTACT NUMBER

EMAIL

OFFICE USE ONLY
COURSE CODE



PERSONAL DETAILS

DIETARY REQUIREMENTS

None	Dairy free
Vegetarian exclusive	Vegan
Food intolerance	Cultural/religious
Gluten free	Food allergy
Coeliac	Other

Provide details e.g. food type, severity, last reaction:

HEIGHT (CM) WEIGHT (KG)

FITNESS

Can you comfortably run 3km in under 25 minutes?	Yes	No
Can you complete a full day of physical activity?	Yes	No

WATER CONFIDENCE

Are you confident in water and comfortable putting your head underwater?	Yes	No
Can you swim 20 metres?	Yes	No

SMOKING & VAPING

Do you smoke?	Yes	No
Do you vape?	Yes	No
Outward Bound is strictly smoke & vape-free. Are you willing to go smoke & vape-free?	Yes	No

CRIMINAL

Do you have charges pending, convictions?	Yes	No
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If yes, provide details of convictions, charges, sentences and dates:

MENTAL HEALTH

Have you experienced any mental health challenges such as anxiety/depression/bi-polar/PTSD/schizophrenia/eating disorder/self harm in the past 2 years?

Yes No Unsure

Provide details:

HEALTH & WELLBEING

Do you have, or have you ever had, any of the following medical, behavioural or developmental issues?

Neurodiverse - Autism spectrum disorder (ASD), ADHD, dyslexia etc.	Disability - Hearing/intellectual/physical/vision
Diabetes	Serious illness/major operation/knocked unconscious/fainted within last year
Seizures - If yes, specify type and date(s)	Heart/Respiratory condition
Allergic reactions e.g. bees/wasps/nuts	Dislocation/Joint injury
Treatment/ Counselling for alcohol or drug use	Other
Epilepsy diagnosis	None

***If you ticked YES to any of the listed medical issues, please provide further information:**

MEDICATION

Do you take any medication?

Yes No

If yes, please list medication names, dosages and start dates:

PAYMENT

PAYING MY COURSE FEE

- I will be paying my remaining course fee
- My company will be paying my remaining course fee
- Other - please provide details below

PURCHASE ORDER (IF REQUIRED)

If you are paying by credit card please complete the payment section below, otherwise leave blank.

Please charge my: VISA MASTERCARD EXPIRY DATE (MM/YY) /

CARD NUMBER

NAME ON CARD

SIGNATURE* See over the page for instructions on creating a digital signature

TERMS & CONDITIONS

PAYMENT

Paying your course fee

Full payment is required 8 weeks before your course start date. Course fees are in NZ dollars. For support with fundraising head to our website: www.outwardbound.co.nz/planning/funding/

Transfers

Your full course fee may be transferred once only to another course date up to 30 days before your course start date. (Transfers are not applicable to scholarships provided by Outward Bound). Any additional transfers will incur a fee of \$749 per transfer.

Refund, cancellation & departure policy

Your course fee, less your \$749 deposit, is refundable up to 30 days before your course start date. (Deposits are non-refundable except for medical reasons, at which point a verified medical certificate is required for cancellation).

If you cancel within 30 days of your course starting, your full course fee is not transferable or refundable. Cancellations must be received in writing i.e. email.

If you depart due to an injury or illness* incurred on course, and you have completed less than 70% of your course, you will receive a pro-rata refund, e.g. you will be refunded for each day of your course you did not complete, less your deposit. If you have completed 70% or more of your course, you will not receive a pro-rata refund.

If you have received Outward Bound scholarship funding towards your course fee or you are participating in any custom design course, refunds are handled on a case by case basis.

If you depart early or are sent home from your course due to behaviour or motivation barriers, your course fee is not transferable or refundable.

If you depart your course due to an undisclosed existing medical or mental health condition, your course fee is not transferable or refundable.

*Due to the critical setup phase of the first three days of your course, if you fall ill and need to be isolated during the first three days of your course you will not be able to continue your course. In this instance, you will be eligible for a pro-rata refund as detailed above.

HEALTH & WELLBEING

Smoke, vape, drug & alcohol free

Outward Bound has a strict no-smoking and vaping policy. No alcohol or non-prescription drugs are permitted.

Medical declaration

Your Outward Bound medical declaration must be returned to us at least 8 weeks before your course start date. You may be asked to book an appointment with your doctor if we require further medical information.

Sickness on Course

Outward Bound actively takes steps to prevent the spread of any infectious illness during all courses.

You must contact Outward Bound if you have any illness in the days prior to course start - our screeners will advise you whether it is still the appropriate time to attend.

Participants or staff with mild cold symptoms will be asked to wear a mask when indoors.

Any participants or staff displaying flu or COVID-19 like symptoms will be asked to take a Rapid Antigen Test.

Anyone producing a positive test result will be asked to isolate until one of the following occurs:

- 5 days have passed since symptoms began
- a negative test result is produced
- they have been symptom-free for 24 hours

Continue and sign over the page >

Safety

Your safety and welfare is our primary concern, however you do participate at your own risk and there are times without direct staff supervision. Our courses are designed to be mentally, emotionally and physically challenging, with long days and a good night's sleep not guaranteed. Activities occur in all weather conditions and can include off-track tramping, camping (sometimes alone), kayaking, running, sailing, swimming, rock climbing and high-ropes.

Although we have procedures in place to minimise risk, none of these risks can be completely eliminated. When undertaking any activity, you will be briefed on the risks and how to manage them. There is a chance you could get a cold, stomach illness, blisters, sunburn, exhaustion, wasp stings, infected cuts or insect bites, sprains, or some other injury, and may be asked to sit out certain activities.

There have been no major life changing injuries at Outward Bound in over 25 years, however, serious risks can never be completely eliminated. These include death or injury from falling, drowning, burns, hypothermia, heat stress or road accidents. To reduce the likelihood of a serious accident we have a robust externally audited safety management system, which includes trained staff, up-to-date weather forecasts, robust communication protocols, modern equipment, and emergency procedures.

PRIVACY

Personal information

Your personal information will be held confidential to Outward Bound, in accordance with the Privacy Act (2020), for the purposes of Outward Bound courses and associated administration, including promotional activities.

You have the right to see all information held by Outward Bound and may ask at any time for that information to be corrected.

You authorise Outward Bound the right to send a copy of your course report to your course fee sponsors, including employers, if requested.

Promotional material

You authorise Outward Bound the right to use your name, comments and images (video footage or photographs) that are obtained in relation to your Outward Bound participation and to disclose this information to third parties for marketing and public relations purposes; these materials will remain the property of Outward Bound.

You grant Outward Bound permission to contact you by email, including a regular e-newsletter and other updates.

Confirmation of your enrolment is subject to approval from both your doctor and Outward Bound. This is to ensure your safety, the safety of others, and quality course outcomes for all.

PERSONAL DECLARATION

- I have read the above information and I understand that there are risks associated with participating in some course activities and these risks cannot be completely eliminated. Risks exist in these activities that may result in serious injury or even death.
- I am willing to fully participate in my course, comply with all instructions, and respect others, their beliefs and belongings.
- I understand that, to the maximum extent allowable by New Zealand law, Outward Bound is not liable for any injury, damage, delays or other additional costs that I incur. If I am an international participant, these terms and conditions and my participation in Outward Bound is governed by New Zealand law; I am therefore subject to the exclusive jurisdiction of New Zealand courts.
- I understand that, except as expressly permitted by law, if I give false information, withhold relevant information, or do not advise of any new relevant information, and that if I do not comply with the above Terms and Conditions, my enrolment may be cancelled or I may be sent home from my course at my own expense.
- I give consent for Outward Bound to contact my next of kin in the event of a medical necessity, and give consent for the disclosure of personal medical information to my next of kin.

PARTICIPANT NAME

TODAY'S DATE

/ /

PARTICIPANT SIGNATURE*

*To sign this document digitally, click into the participant signature box. Select an existing digital signature or choose to create a new digital ID.

To create a new ID: Select option new PKCS# option. Enter your personal details and leave all other fields as defaulted. Create a password. On the next screen enter your password and click sign, save the form to your local drive. You will now see your signature in the document.