CARITAS CHALLENGE PARTICIPANT CONTRACT

Name:

I understand that this event is an opportunity for me to experience in a small way some of the challenges faced by those living in poverty on a daily basis. I realise that I need to take on genuine responsibility for my own safety and that of others.

I agree to do the following to make this happen:

- Show courtesy and consideration to others.
- Follow the rules and instructions of staff and other supervisors at the event.
- Look after myself and my personal belongings.
- Declare medical conditions that could affect my participation in the event.
- Accept the rules set by the school/youth group for the event, even if they are different rules to what I have at home.

I understand that my parents/caregivers will be contacted and I may be sent home if:

- My actions are considered unacceptable by staff.
- I breach the school/youth group drugs and alcohol policy.
- My actions put others in danger.



Signed: Date:



Parent/Guardian signature:	Date:
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