



CASINO BEEF WEEK YOUTH CAMP

Entry Form



5th - 7th April 2024 Casino Showgrounds

Proudly Sponsored By



CONDITIONS OF ENTRY

1. The Casino Beef Week Youth Camp is organised by Casino Beef Week Promotions Committee Inc., "The Organiser" with the assistance of an active working group "The Camp Committee."
 2. Entry forms are to be returned with payment by the 1st of March 2024, if entries have not reached capacity. Positions will only be finalised on receipt of payment.
 3. Accommodation for competitors will be available at the Showgrounds. Full catering facilities will be available for the duration of the show. Camping is the responsibility of the Parents/Guardian and not that of the organiser or the camp committee.
 4. Camping is permitted on the Showgrounds; however, The Organiser and The Camp Committee are not responsible for any injuries or loss of belongings that occur. **All participants must be always under the supervision of an assigned adult while camping.**
 5. The management and control of the Junior Show is in the hands of The Camp Committee and their decision will be final.
 6. The Organiser will not be responsible for any accident that may be caused through or by any participant, and it shall be a condition of entry that each participant shall hold the organisation harmless and indemnified against any legal proceedings arising from any such accident.
 7. The Organiser will not, under any circumstances, hold itself liable for any accident on the ground or premises.
 8. Showers, toilets and indoor sleeping areas are available on the ground, however, entrants are to supply their sleeping items/swags and toiletries.
 9. Any entrant under the age of 18 found to be consuming alcohol will be asked to leave immediately through their parent's notification and own expense. **Any person found supplying alcohol to persons under 18 will also be required to leave the site and will be reported to relevant authorities.**
 10. No participant may leave the grounds without parents' approval and prior arrangements made with The Camp Committee.
 11. Any inappropriate behaviour from entrants will not be tolerated and will be dealt with in a manner seen fit by The Camp Committee.
 12. All competitors enter at their own risk. Insurance and public liability is the responsibility of the entrant/owner/exhibitor.
 13. Any damages to equipment and/or bibs will be invoiced at the end of the camp for \$25.
 14. Exhibitors must be aged between 7 – 18 (Inclusive) as of 5/4/2024.
 15. Exhibitors do not have to be the owner of their animals.
 16. Sizes for shirts must be sent with entries for ordering.
 17. Shoes to be always worn, ABSOLUTELY NO THONGS/SANDALS in cattle sheds or judging lawns.
 18. All electrical appliances MUST be tagged in accordance with the insurance policy.
 19. The Organiser's decisions for special prizes will be final and no dispute will be entered into.
 20. A current National Health Declaration Form must accompany all entries.
 21. Bulls can only be paraded by competitors aged 16 and over, NO EXCEPTIONS.
 22. Eligible heifers must be between 6 & 24 months of age at 5/4/2024. Bulls must be aged between 6 & 16 months as at 5/4/2024.
 23. The owner/s of the animal shall warrant that they are absolute owners of any animal entered by them or by their authority to the show ground and shall identify The Organiser against all claims on whatsoever ground and whatsoever cause made against the Organiser or the group in respect as such animals at the insistence of any other person.
 24. All exhibits must have an acceptable temperament, be broken to lead and conform to required health regulations.
 25. All exhibits MUST be paraded with nose clips at all times while on the grounds. All bulls MUST have nose rings & must be led with a lead attached at all times.
 26. Classes for judging are to be determined after the close of entries.
 27. Exhibitors to supply own cattle feed and equipment – initial bedding supplied free (SAWDUST). BYO additional bedding. Any special bedding must be cleaned out before competitors leave.
 28. All Exhibits are to wear neckties while tied up inside the bedding/shed areas
 29. Cattle may arrive on site from Thursday the 4th of April 2024, a designated time will be communicated to entrants prior to the event.
 30. All competitors are to be at the Induction at 9 am Friday 5th April 2024
 31. Duplicate (white or photocopy) Pedigree Certificates for each animal must accompany the entry form & registration numbers are to be provided. Steer entries require name only.
 32. All animals to be registered and tattooed in accordance with their Society rules and must have NLIS tags.
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33. Please complete the waiver form signed with your entries – without this being signed and returned you will not be covered by insurance thus will be unable to participate or compete
 34. Recommended Dress Code – For young Paraders and Judges Competitions - Clean cream jeans or denim, a clean shirt (Camp Shirt when advised), hat, and clean boots. Entrants will be judged on personal presentation throughout the camp. Tie/scarf/necklaces are optional but recommended.
 35. No competitor is permitted to wear a dust coat or sports coat in any competition.
 36. All entry fees listed in the schedule must be paid in full by the 1st of March 2024, alongside the submission of entry forms. Failure to comply with this payment deadline may result in the forfeit of the participant's position at the Casino Beef Week Youth Camp. No refunds will be issued for any fees paid for entry, accommodation, or other services related to the Casino Beef Week Youth Camp once payment has been made. This includes, but is not limited to, cancellations, non-attendance, or any changes to the event schedule. Participants are encouraged to consider this policy before making payments.
 37. Special Consideration for No Refund Policy: Requests for refunds due to exceptional circumstances (such as serious illness or family bereavement) will be considered on a case-by-case basis by The Organiser. Documentation supporting the exceptional circumstance (e.g., medical certificate, death certificate) must be provided along with the refund request. The decision of The Organiser regarding the eligibility for a refund under these special considerations will be final and binding.
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PARENT REGISTRATION (MINIMUM 1 PER FAMILY)

Full Name:

Phone:

Email:

Address:

City:

Post Code:

I AM REGISTERING THE FOLLOWING CHILDREN:

Name	DOB	Relationship to Adult

VOLUNTEERING

Please indicate if you can assist in any of the following ways.

- Group Leader / Assistant*
- Educational Activities*
- General Hand (Assisting participants with their cattle) *
- Food Preparation and Cleaning
- Administrative support

MEALS

Meals are available for parents to pre-purchase if they wish to stay on-site. The cost of the meals shall be \$60. This covers 3x Breakfast 2x Lunch 1x Dinner (Friday Night). Saturday night will feature our dinner and auction evening and is ticketed separately at \$25 p/p.

Please indicate below if you wish to be assigned meals.

- All Meals including Saturday dinner - \$85
- All Meals excluding Saturday dinner - \$60
- ONLY Saturday Dinner - \$25

CAMPING

- I will be camping on-site

ADDITIONAL PARENT REGISTRATION (MUST BE COMPLETED IF CAMPING)

Full Name:

Phone:

Email:

Address:

City:

Post Code:

VOLUNTEERING

Please indicate if you can assist in any of the following ways.

- Group Leader / Assistant*
- Educational Activities*
- General Hand (Assisting participants with their cattle) *
- Food Preparation and Cleaning
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MEALS

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- ONLY Saturday Dinner - \$25

CAMPING

- I will be camping on-site.

PARTICIPANT ENTRY FORM (1 PER PARTICIPANT)

CONTACT DETAILS

Full Name:

Phone:

Email:

DOB:

Age:

Address:

City:

Post Code:

Dietary needs:

UNIFORMS

Kids Shirt Size (Please Circle):

Kids	4	6	8	10	12	14	16		
½ Chest (cm)	36	38	40	42	44	46	49		
Men's	S	M	L	XL	2XL	3XL	4XL	5XL	7XL
½ Chest (cm)	52	55	58	62	65	71	75	79	87
Ladies	8	10	12	14	16	18	20	22	24
½ Chest (cm)	46.5	49	51.5	54	56.5	59	62	65	68

CATTLE EXPERIENCE

Level of Experience:

- Very Experienced
 Some Experience
 Little Experience
 No Experience

Please describe your experience:

I will be bringing my Animal to camp. Yes No

CAMPING

I will be camping on-site. I will be leaving the site daily.

Name(s) of Authorised Pick-Up Persons:

PHOTOGRAPHY

I, _____, being the legal guardian of the participant named above, hereby grant permission for Casino Beef Week Promotions Committee Inc., to capture, distribute, and use photographs of the named participant in future marketing material. This includes images captured during 2024 Casino Beef Week Youth Camp activities through video, photo, and digital camera.

These images may be used in brochures, social media, promotional materials, or other publications associated with Casino Beef Week Promotions Committee Inc. I understand that this consent is voluntary, and I waive any rights of compensation or ownership of these images.

Signed:

Name:

MEDICAL INFORMATION FORM (1 PER PARTICIPANT)

THIS FORM IS STRICTLY CONFIDENTIAL.

Full Name:

Phone:

Email:

DOB:

Gender:

EMERGENCY CONTACT DETAILS

Full Name:

Phone:

Email:

Alternate Phone:

Relationship:

INSURANCE/MEDICARE

Medicare Details

Private Health Insurance

Medicare Number:

Insurance Company:

Individual Number:

Policy Number:

Expiry Date:

Group Number:

MEDICAL HISTORY:

Does the participant have any Chronic illnesses (e.g., asthma, diabetes): Yes No

Is the participant on any medication: Yes No

Does the participant suffer from any allergies? Yes No

Is there any medical treatments that the camp staff should be aware of: Yes No

Date of last tetanus shot (If known):

CONSENT FOR TREATMENT:

I hereby give consent to the camp staff to provide routine health care, administer prescribed medications, and seek emergency medical treatment including ordering x-rays or routine tests. I agree to the release of any records (including this document) necessary for treatment, referral, billing, or insurance purposes.

Parent/Guardian Name: _____

Signature: _____

Date: _____

MEDICAL INFORMATION DETAILED

If you answered YES to any question in the medical history section, please elaborate here.

Full Name:

DOB:

Gender:

CHRONIC ILLNESS

To help assist our staff please provide an overview of any Chronic Illness that the participant may have.

Illness	Length of Illness	Treatment

MEDICATIONS

To help assist our staff please provide an overview of any medication that the participant may have.

Medication	Dosage / Time	Notes

ALLERGIES

To help assist our staff please provide an overview of any Allergies that the participant may have.

Allergy	Severity	Treatment

SURGERY/MEDICAL TREATMENTS

To help assist our staff please provide an overview of any recent surgeries or treatments that may affect the participant.

Type of Surgery/Treatment	Date of Treatment	Is the condition ongoing

OTHER HEALTH INFORMATION:

Please provide any additional health information here:

CATTLE REGISTRATION FORM (1 PER FARM)

If you are bringing any cattle to camp you must provide their details at a minimum of 7 days before the camp.

Please provide as much detail as possible, if you have arranged a loan animal, and are yet to know the details please provide details of the Stud from which you are loaning.

FARM DETAILS

Property Name:

Address:

City:

Post Code:

Contact Person:

Phone:

CATTLE DETAILS

Name of Exhibit	Tattoo No	DOB	Sex	Exhibitor

By signing, I affirm:

- Ownership:** I own or have permission to enter the listed animal(s) for the Casino Beef Week Youth Camp and confirm no disputes over this ownership.
- Indemnification:** I indemnify The Organiser (Casino Beef Week Promotions Committee Inc.) against all claims related to my animal(s)' participation, accepting all responsibility for risks, damages, or losses.
- Acknowledgment:** I understand the risks involved, agree to follow all event rules, and recognize this as a binding agreement.

Name of Owner:

Owners Signature:

Date:

FEES AND CHARGES

Please use the following table to calculate pricing:

The Saturday Dinner and Auction evening is open to any family/mentor who has a direct connection to the participant. If additional people are attending, please indicate the correct quantity here, and provide a list of additional adults/relatives that will be attending.

Item	Cost	Qty	Total
Children Registration (1 st in Family)	\$125		
Children Registration (Additional Children) *	\$100		
Parent Meals – All Meals including Saturday dinner	\$85		
Parents Meals - All Meals excluding Saturday dinner	\$60		
Parents Meals – Just Saturday Dinner	\$25		
Saturday Dinner - Additional Children Meals (Under 12)	\$15		
Non-Participant Children (Under 12) All Meals excluding Saturday dinner	\$40		
Additional Polo Shirts	\$30		
Additional Hat	\$30		
Grand Total			

*Additional child discount applies to siblings ONLY.

Payment is to be made into the following account:

Name: Community Youth Chest

BSB: 728 728

ACC: 22348031

Please use the below table to register anyone coming for the Saturday Dinner beyond the parents registered already in this entry form.

Name	Relationship	Age if under 18