

Pozhet Retreat

9th October – 11th October 2015

RETREAT ONLINE APPLICATION FORM

ALL APPLICATIONS CLOSE ON Wednesday 2nd September 2015

A copy of this form **must** be completed for **every** adult wishing to attend (including partners)

*Name: Year of Birth:

Address for information to be sent: (Street)

Suburb / Town.....Postcode:

*Phone: (h) (m)

*Email:

*Do you have any dietary requirements? **Yes** **No**

If yes please select *Diabetic* *Vegetarian* *Other*. Please give details

.....

Do you have any mobility restrictions? Eg. Wheelchair/ walker **Yes** **No**

Details.....

The Retreat is a weekend program where people have an opportunity to meet others, support each other, build confidence and learn skills about living well with HIV and of course have fun. The weekend is made up of organized activities as well as times where you can catch up with other, relax or use some of the sport and recreation facilities available. We do expect people to participate in all the planned groups and activities from Friday evening through to Sunday afternoon. If you are unable to do some of the physical activities or don't feel up to saying much that's fine. There are many ways you can still be involved. Listening and supporting others is participating.

*I have read the above statement and am prepared to be involved in the weekend activities. I will let the facilitator know if I can't participate in any activity. **Yes** **No**

*I am able to attend for the whole weekend (Friday dinner- 3pm Sunday) **Yes** **No**
If NO is there a particular reason that you are not able to attend for the whole time

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*Is there other information we need to know to assist your stay at the Pozhet Retreat?

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If using public transport, will you a lift from Morrisset Station to the venue? **Yes** **No**

*Have you ever been to a Pozhet Retreat before? **Yes** **No**

**Required answers*

Please turn over /more questions over the page

Retreat Participation & Confidentiality Agreement

I understand and agree that I am responsible for my own participation at all times. I will notify the organisers if I am unwell or cannot participate in any activity during the retreat. I understand that only accommodation, meals and activities are covered by Pozhet. We do not cover travel costs.

****Please note cancellations with less than 7 days notice may attract a fee payable by the applicant. Please let us know in advance...this Retreat is a popular event.**

I accept the Pozhet Retreat is alcohol and recreational drugs free at all times.

*I (insert name) as a participant of the Retreat, may have access to information of a highly personal and confidential nature. This includes medical conditions and treatment, sexuality, relations with family members, names of individuals with HIV, their family and friends, and other identifying information. I agree that I will not discuss the content of any personal or group discussions or disclose information of a personal or confidential nature to anyone else.

*Type in Initials here to agree to the above.....Date:

Please complete the following section, if applying to bring young children

Pozhet will try to meet the needs of parents who have young children who need to be with them on the weekend.

Name of child 1.....DOB.....

Particular needs eg. Cot or high chair

Dietary needs of child

Name of child 2.....DOB.....

Particular needs eg. Cot or high chair

Dietary needs of child

I understand that I am responsible for young children under 16 I bring to the retreat and that there is currently no childcare or organised activities for children.

Initial here to agree:Date:

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For more information Pozhet: 1800 812 404

