

**YOUTH ACTIVITIES
LIONS INTERNATIONAL - NEW ZEALAND**

Application & Indemnity Forms
Multiple District 202 New Zealand Lions District _____

YOUNG SPEECHMAKER CONTEST

I. APPLICANT'S DATA (Please print ALL details clearly, including email address)

Surname:..... -

Forenames:..... called by.....

Address:.....

Phone STD(.....) Mobile Email.....

Date of Birth Age

*Must have had 16th birthday and not be over 21 by 15 November of year of entry

Present field of Study or Occupation:

Secondary/ Tertiary/ Working School/University.....

Career Objectives

Any special dietary requirements?.....

II. APPLICANTS FAMILY DATA (If the applicant is over 18 please advise details of your Next of Kin)

Parent/Guardian 1/Next of Kin

Parent/Guardian 2/Next of Kin

Parents'/Guardians' address

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Phone STD(.....) Mobile Email.....

III. SPONSOR CLUB DATA

Sponsor Club.....

Email.....

How was applicant selected?

Application must be with your Lions District Youth Chair By 16th May 2025

IV. INDEMNITY FORM for applicants under 18 years of age

I/We the Parent(s)/Guardian(s) ofhave discussed the NEW ZEALAND LIONS' YOUNG SPEECHMAKER CONTEST with our young adult and they have our permission to apply for participation in the programme. We the undersigned Parent(s)/Guardian(s) of the above-named Applicant here by grant permission for them to travel within the district and also nationally, should they be successful. We further certify to agree to relieve any Lions Club Member or Host Family, Lions Club, Lions Club District or Lions Club International of any financial or other responsibility in the case of his/her illness or death, as far as may be applicable to indemnify them in respect of expenses incurred. We confirm they will remain at all times with the Host, or other such accommodation arrangements made by the Lions organisers, and we agree that any breach will result in the youth's immediate return home, any extra travel costs being our absolute responsibility. I/We the Parent(s)/Guardian(s) give legal consent for a Lion Member of the Club hosting our youth or Lions Multiple District or District Youth Chairman or Committee Member to take immediate action in Surgical or Medical Emergencies, when time does not permit the obtaining of consent by me/us.

Date:..... Signed: Parent/Guardian 1.....

Parent/Guardian 2.....

V. OBLIGATIONS OF THE APPLICANT

I the undersigned applicant, understand and acknowledge that:

- I will be required to follow the guidance/instructions of the organisers at both district and final competitions.
- The judges' decisions are final and binding.
- Photographs and video of competition taken during the contests will be used by Lions Clubs NZ as part of future promotions.
- During any period of travel and possible accommodation for the final I will be under full control and responsibility of the adults of the hosting committee.

Date:..... Signature of Applicant:.....

VI. SIGNATURES

1. Applicant:..... Date of application:.....

2. Sponsor Lions Club President or Secretary:..... Date

3. Sponsoring Club:..... Date

4. MD Young Speechmaker Co-ordinator:..... Date

The completed application forms for those District Winners attending Multiple District Finals are to be forwarded to the MD Young Speechmaker Coordinator as soon as possible following the District Competition.