



FOUNDED IN 1975

Kapiti Explorers Club

New Zealand Association for Gifted Children Inc.

Evidence of Giftedness:

With this application, Explorers requires evidence that at least one child in the family has intellectual or creative ability in the top 5%. This acknowledges that some children with such ability may not be performing in the top 5% at present. This evidence could be any of the following:

- ♣ Letter from school/parent with specific information about the child’s learning, social behaviour or development indicating ability in the top 5%.
- ♣ PAT (done in most schools after age of 6) or other educational assessment
- ♣ IQ or other psychological assessment (top 5% ie 125 IQ)
- ♣ Reading age
- ♣ Attendance at special ability/accelerant programmes such as CWSA, CWEA, George Parkyn Centre, Gifted Kids Programme and GATE. Attendance at Small Poppies.
- ♣ Membership at another branch or similar organisation with similar criteria

Please supply evidence of giftedness as an attachment.

Parents or Guardians (Please print)

Name	Name
Address	Address
.....
.....
Post Code	Post Code
Phone	Phone
Fax	Fax
Email	Email
Occupation	Occupation
Relationship to child	Relationship to child

Children: The whole family may be involved in Explorers activities. Please list all the children in your family, from eldest to youngest. If surnames are different from parents please indicate correct surname.

Name (known by)	Date of Birth	M/F	School currently attending

How did you hear about Explorers?

- | | | |
|---|--|--|
| <input type="checkbox"/> Regular school/preschool | <input type="checkbox"/> Specialist school/preschool | <input type="checkbox"/> Health Professional |
| <input type="checkbox"/> Media | <input type="checkbox"/> Friend/Family | <input type="checkbox"/> Psychologist/Assessor |
| <input type="checkbox"/> Web site/internet search | <input type="checkbox"/> Other (please give details) | |

From time to time NZAGC has need for information to support statistical research, lobbying and other purposes relevant to the aims of the organisation. Please sign those statements with which you agree.

Privacy Act

♣ I agree that details supplied in this application may be so used. I understand that this information will be used in such a way that individual children will not be identified

Signed.....

Explorers often has requests from parents seeking member families in their area.

♣ I agree to my name and phone number being supplied to other parents

Signed.....

The NZAGC has a discussion forum where issues affecting gifted children e.g. existing/new schools, are discussed. You can be sent email communications from this forum and can comment on these if you wish.

♣ I wish to receive communications from the discussion forum by email.

Signed.....

Important Note! Parents' Responsibilities

You are responsible for your children and any children in your care. Explorers is not responsible for any of your children regardless of age at any time during any activities e.g. clubdays & camps. Explorers wants to offer a range of activities that will interest our diverse membership. Some of these activities will require more parent supervision than others and it is the parents' responsibility to ensure that they are fully aware of all safety procedures, attend any safety briefings offered in relation to a particular activity, and to ensure the children adhere to all rules and act in the interests of their own safety and the safety of others. Parents must supervise all their own children regardless of age at all times as Explorers will not be held liable for your safety or your children's safety during activities. I/we agree to the above and will be fully responsible for our children and any children we might have in our/my care during all Explorer activities.

Signed.....

Explorers is a voluntary organisation run by the members for the members. Therefore, you will be required to help with activities sometimes. Please indicate particular areas where you could help.

- | | | | |
|----------------------------------|--|---|---|
| <input type="checkbox"/> Library | <input type="checkbox"/> Phone or email bookings | <input type="checkbox"/> Committee | <input type="checkbox"/> Magazine |
| <input type="checkbox"/> Funding | <input type="checkbox"/> Web Site | <input type="checkbox"/> Administration | <input type="checkbox"/> Activity/Conference planning |

Return with your cheque to either address below.

Yvonne Gatland
36b Toru Rd
Paraparaumu Beach
Kapiti Coast
Phone 04 298 1143
Email yigat@yahoo.com.au

Elizabeth Pang
PO Box 2115
Raumati
Phone: 04 2988158
Email: J.Pang@clear.net.nz

Explorers membership fee: \$51.00 (\$25.50 1 September – 31 December). This includes national membership and a subscription to *Tall Poppies* magazine. Make your cheque out to Explorers.
(If for some reason your application is not accepted, your cheque will be returned)

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For office use only:

Evidence supplied: By whom

Date entered:..... Date approved if different

Membership no. Subscription paid: \$.....

Newsletter sent: Term Labels/name tags made: National notified: Payment ID: