



GROUP LEADER DECLARATION

- I have read and understood the COVID-relevant information and requirements of Group Coordinators
- All Group participants (and/or guardians) have been informed they should not attend camp if exhibiting symptoms of Covid-19 or returned from overseas or an Interstate Hotspot in the past 14 days or been contacted as part of Contact Tracing efforts by Queensland Health.
- In the event Queensland Health authorities need to undertake contact tracing I will make contact details of all group participants immediately available to assist. I have provided emergency contact details below to enable QLD Health to contact me if necessary after the camp has concluded.
- I have included a labelled water bottle an essential item to bring to camp in information to camp participants.
- I understand camp participants must be accommodated in the sleeping quarters I assign to them, as provided to QCCC staff in the fire register.
- I understand camp participants must remain in the activity group assigned to them to assist with contact tracing their interaction with QCCC activity staff, and/or its providers.

Signed: _____

Name of Group Coordinator: _____

Group: _____

Dates of Camp: _____

Emergency Contact Details:

Telephone: _____ **Email:** _____