

Online Form - Top Blokes - Semester Two

Activity Name:	Top Blokes - Semester Two
Date/Time:	 Tuesday 30 July 2024 11:40am - 12:40pm (Period 3) Tuesday 6 August 2024 11:40am - 12:40pm Tuesday 13 August 2024 11:40am - 12:40pm Tuesday 20 August 2024 11:40am - 12:40pm Tuesday 27 August 2024 11:40am - 12:40pm Tuesday 3 September 2024 11:40am - 12:40pm Tuesday 10 September 2024 11:40am - 12:40pm
	 Tuesday 17 September 2024 11:40am - 12:40pm Tuesday 24 September 2024 11:40am - 12:40pm Tuesday 15 October 2024 11:40am - 12:40pm Tuesday 22 October 2024 11:40am - 12:40pm Tuesday 29 October 2024 11:40am - 12:40pm Tuesday 5 November 2024 11:40am - 12:40pm Tuesday 12 November 2024 11:40am - 12:40pm Tuesday 19 November 2024 11:40am - 12:40pm Tuesday 26 November 2024 11:40am - 12:40pm Tuesday 3 December 2024 11:40am - 12:40pm Tuesday 10 December 2024 11:40am - 12:40pm Tuesday 17 December 2024 11:40am - 12:40pm Tuesday 17 December 2024 11:40am - 12:40pm
Description:	Henry Kendall High School will be running the Junior Top Blokes Mentoring Program facilitated by the Top Blokes Foundation over Semester Two. This mentoring program takes place at school during normal school days, on schoo grounds for approximately 1 hour per week. The program runs for a school semester with 18 workshops delivered, covering social issues that may impact young men's health including: • The overuse of Alcohol and other Drugs • Fostering positive Mental health • Anger Management • Understanding Masculinities • Peer Pressure & Risk Taking • Online Behaviours • Building Healthy Relationships • Realities of Pornography • Sexual Health • Building Stronger Relationships with Teachers • Sexualities and Discrimination

	Power and PrivilegeLeadership and Teamwork.	
Venue:	Henry Kendall High School - CU8	
Dress Code:	Full Sports Uniform.	
Due Date:	Tuesday 23 July 2024	
acknowledge that this event 19 Public Health Orders and accept that there is a risk th	* indicates a required field and give consent for my child, to attend the Top Blokes - Semester Two. I t/activity is required to be held in accordance with any current NSW Health COVID-1 the NSW Department of Education's policies and procedures. I acknowledge and at my child may be exposed to COVID-19 whilst attending and participating at this d will not attend if displaying any symptoms of illness, and/or if directed to isolate	
Parent/Carer Name: *		
Parent/Carer Phone Numbe	r: *	
Emergency Contact Name:	t	
Emergency Contact Phone I	Number: *	
Medical conditions/informa	tion relevant to the activity (including any medication required):	
I give permission for my chi * Yes	ld to be recorded or photographed to promote the event on local and social media:	
○ No		
Parent/Carer Signature: *		

