

Activity Information Form



Event: West Devon District Sleepover **Date:** 18/3/17 – 19/3/17

Location: Blindmanswood Scout Centre, 324 Outland Rd, Plymouth PL3 5TB

Meeting place and time: 11:00am Blindmanswood Scout Centre, Plymouth

Collection place and time: 10:00am Blindmanswood Scout Centre

Cost: £11.00

- Wear / Bring:**
- Uniform on arrival..
 - Packed Lunch
 - Please **do not bring any food, sweets or treats.**

Contact details during event :

Colony Leader: Rachel Dewsbery 07876 134124

Organiser: Mrs Ann Ward - ADC (Beaver Scouts)
Contact details: 01822 611442, 0777 1539643 or otterw@hotmail.co.uk

Please keep this section for your own information, and detach and return the section below.

Note: All activities will be run in accordance with The Scout Association's safety Rules. No responsibility for the personal equipment/clothing and effects can be accepted by the organisers and The Scout Association does not provide automatic insurance cover in respect to such items.

Please complete and return this section to Rachel Dewsbery by 01/03/17

Name of young person: **D.o.B:**

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*I enclose a cheque / cash for £11.00 (cash in an envelope or cheques payable to Bridestowe Scout Group)
I have noted the arrangements above and agree to the named young person taking part.*

Emergency contact: **Phone:**

Doctor's name and contact details: **Details of any medications currently being taken:**

Details of any disabilities, conditions, allergies, special needs or cultural needs that might affect this activity: **Details of any infectious diseases he/she has been in contact with in the last three weeks:**

If it becomes necessary for the above named young person to receive medical treatment and I cannot be contacted to authorise this, I hereby give my general consent to any necessary medical treatment and authorise the Leader in charge to sign any document required by the hospital authorities.

Signed: **Date:**

Relationship to young person:

Note: The medical profession takes the view that the parent's/carer's consent to medical treatment cannot be delegated. This view is explicit in The Children's Act 1989. Thus, medical consent forms have no legal status and a doctor or nurse insisting on the consent of a parent/carer to a particular treatment has the right to do so. For this reason we do not recommend that Leaders insist on parents/carers signing the statement above. However, it can be a comfort to medical staff to have general consent in advance from parents/carers or to have a Leader on hand able to sign forms required by medical authorities.

Kit List

Beaver Scouts to arrive in uniform

Wear normal shoes or trainers as we will be indoors to begin with.

Wellington boots or boots suitable for outdoors and mud.

Waterproof coat

Waterproof trousers if available

Warm hat

Spare trousers

Spare t-shirt or top

Spare jumper

Sleeping bag

Carry mat

Pillow if required

Pyjamas

Toothbrush and toothpaste

Spare pair of pants and socks

Cuddly (essential)

Torch

Please note your child will be playing outdoors during this event, unless there are severe weather conditions. Please ensure they have the right clothes to keep them warm and dry outside. Additionally please encourage your child to pack his or her bag themselves or watch as you pack it so that they know what is in the bag and where.

Thank you for your co-operation