

Nights Away Information Form

Fillongley Scouts – Fitness Challenge!



Event: Scouts Activity Camp **Section:-** Scouts **Date:** 23-26th May 2014
Springbank Campsite, Shrewsbury Road, Church Stretton, Shropshire SY6 6HB

Meeting place Date and time: Scout Hut : Friday 23rd May 6pm

Collection place Date and time: Fillongley social club car park - Monday 26th May approx. 4pm TBC

Cost: £40

Transport /Accommodation details: Car share: camping,

Activities Hiking – This is the fitness challenge badge – preparation required – see attached!

Wear / Bring: Travel in uniform,

Further details: See attached equipment list as a guide (it may be wet).

Organiser and contact details: Steven Gill 01676 542698

Emergency Contact for Event Lesley Gill Tel 07903291995

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 Skip by 15th May 2014 (form and money in an envelope do not combine with anything else)

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

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*I enclose a cheque / cash for £40 (please make cheques payable to **Fillongley Scouts**)*
I have noted the arrangements above and agree to the named young person taking part.
I understand that the event Leader reserves the right to send any participants home if deemed necessary.

Is he/she able to swim 50 metres and stay afloat for five minutes in light clothing? Yes / No

Emergency contact: _____ This number will be used to notify of return time **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:(changes to be notified)** _____

Special dietary needs

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: _____

Please use the back of this form if more space is required

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.

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Kit List.

The young person will need to bring their personal equipment and should be **encouraged** to pack it him or herself (its part of their Badge). Kit is to be packed in carrier bags **inside** a rucksack. The young person should be able to carry all of their kit.

This List is only a guide and additional equipment for specific activities may be required. Think what you might need.

All items should be clearly labelled with the young person's name, either in biro on labels, nametapes, or permanent marker pen/ nail varnish on cutlery.

If there are any queries regarding this kit list, please contact the Camp Leader or your Section Leader.

Any medicine being taken – this will be carried by the allocated adult & handed to camp First Aider on arrival

General Activities

Walking Boots and extra socks (not nylon or Wellingtons)
Waterproof jacket & trousers.
Scarf, Hat and Gloves

General Clothes

Full Uniform. (Must be worn travelling to and from camp).
Coat.
Warm sweaters, Jumper or sweatshirt.
T- shirts or similar and Fillongley group T-shirt
Shorts and Trousers. (Track suit bottoms) **NOT JEANS**
Spare Underclothes.
Spare socks - wool (not NYLON). – allow **min** 1 pair per day
Nightwear.
Training shoes. (old)

Personal utensils

Pen/pencil/note book.

Tea Towel(s).(1)

1L min Plastic drinks bottle/ container – non leaking - **refillable**
Polythene Bags to separate clean and dirty Items.
Day sack & empty lunch box – see note
Small game ie Top trumps or book

Camping equipment

Torch with Batteries & spare batteries or wind up
Sleeping Mat (No camp Beds)
Sleeping Bag & camp blanket, pillow case
Whistle

Personal Hygiene

Personal Washing Requirements.
Personal hygiene supplies
Towel(s).(1) – not too large
Hankies
Sun Cream and hat **HOPEFULLY**, or winter hat!
Personal First Aid Kit. i.e. small selection of plasters / antiseptic cream/ insect repellent/ bite/ sting relief/ lip salve

Day Sack – must have shoulder straps and be waterproof, capable of carrying waterproofs, lunch, personal first aid, spare clothes, emergency kit - we have a few to loan if necessary

Refillable water bottle

Empty lunch box

Note : prescribed medicines to be labelled in a bag and handed to Section Leader on arrival

Pocket Money: £5 max, No additional food chocolate etc NO Cameras

No Jeans or mobile phones, or Electronic Games please. – No Jeans applies to adults too

We will not have the facility to dry clothes apart from naturally, so the child should not be dependant on them for the rest of the camp

Additional Medical information