

Tendring District Scout Council

Camp Information Form

The _____ (Patrol / Scout Troop/Venture Unit*)
 are to attend a camp of up to four days at the following location:
 Address of site _____

The dates of the camp are from _____ until _____
 The number of persons attending are:

MALE		FEMALE	
Leaders		Leaders	
Scouts		Scouts	
Venture Scouts		Venture Scouts	

Please note, that if females under the age of 18 are staying overnight, it is desirable that they have a female leader available to them, either camping with the group or at another location on the site.

Name of Camp Leader _____
 Group _____
 Position _____

The Scout Association safety rules, Adventurous Activity rules and any other rules laid down by the Association or its representatives must be adhered to at all times.

Details of any adventurous activity to be undertaken:

***climbing / abseil / canoeing / boating / hill walking / details of any other:**

Signed (camp leader) _____ Date _____
 Acknowledged by GSL _____ Date _____
 Acknowledged DC _____ Date _____

Please hand this form to be handed to the District at least 4 weeks before the start of the camp.
 *Delete as necessary