

Activity Information Form

1st Barton Scout Group

Event: Winter Camp 2020 **Date:** 6th-8th March 2020

Location: Thornthwaite Activity Centre, Dacre Pasture Lane, Darley, Harrogate, HG3 4AQ

Meeting place and time: As above - 6pm, Friday 6th March 2020

Collection place and time: Same place, 12:30, Sunday 8th March 2020

Cost: £40

Transport details: N/A

Wear / Bring: Kit list to follow for those who book

Further details: We will serve a snack at supper time on Friday. Eat before you arrive. Likewise we will not provide lunch on Sunday, so treat yourself on the way home.

Organiser and contact details: Gavin Ions – Scout Leader: 07977550060

Contact details during the event: As above

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 Scouts

by Thursday 13th February 2020

Name of young person:

D.o.B:

Event: Winter Camp - Thornthwaite 2020

*I enclose a cheque (payable to Barton Scout Group)/cash for £40 or BACS to 30-59-43 33090205 ref: **Scouts Winter** (please circle payment method).*

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:

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.