

C1 – PERMISSION TO CAMP - APPLICATION FORM

This form is to be sent to the Regional Outdoor Activities Advisor at least one month before the proposed Camp.



PART 1: ADULT LEADER-IN-CHARGE				
Surname:		Name:		
Physical Address:		Home/Work Phone:		Postal Code:
ID Number:			Cell Phone:	
PART 2: CAMPING QUALIFICATION HOLDER				
Surname:		Name:		
Physical Address:		Home /Work Phone:		Postal Code:
ID Number:			Cell Phone:	
Camping Qualification:		Brownie Residential	Guide/Ranger Residential	
		Guide/Ranger Outdoor	Lightweight Camping	
		Ranger Camp Permit		
Date/s of Qualification/s:				
PART 3 – DETAILS OF CAMP AND VENUE				
Date Camp begins:		Date Camp ends:		
Name of owner of camp site:				
Detailed address of camp site:				
Type of camp: Please tick appropriate block				
Guide/Ranger Residential		Guide/Ranger Outdoor		Pack Holiday
				Lightweight
Arrangements for		Sleeping -		Illness -
Storage of food -		Cooking -		Toilet facilities -
Ablution/shower facilities-		Wet weather -		
Details of nearest doctor or hospital:				
Physical Address:			Phone Number:	
PART 4 – DETAILS OF CAMPERS AND STAFF				
Number of Teddies:	Number of Brownies:	Number of Guides:	Number of Rangers:	
Name(s) of Unit(s):				
DETAILS OF ADULT LEADERS/ADULT HELPERS (other than Adult Leader-in Charge)				
NOTE: All Camps must have at least 3 adults on the staff				
NAME	UNIT	DUTIES AT CAMP	QUALIFICATION	DATE OF QUALIFICATION
PART 5 -DETAILS OF PERSON NEAREST TO CAMP WHO WILL ACCEPT EMERGENCY CALLS				
Name:		Tel/Cell number:		
PART 6 – SWIMMING (COMPLETE IF APPLICABLE)				
Venue where swimming will take place:				
Name of Lifesaver:		Age if under 21:		
Qualification:		Date of Qualification:		
TO BE SIGNED BY THE ADULT LEADER-IN-CHARGE		TO BE SIGNED BY THE APPROPRIATE COMMISSIONER		
I have read and accept the Safety Rules for Camping and know about the Insurance Policy for all uniformed members of the Organisation.		I recommend that approval be given for the activity, as stated.		
SIGNATURE:		Name and surname:		
		SIGNATURE:		

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PART 7 - PERMISSION (to be completed by the Adult Leader-in-Charge before submitting the application)	
Adult Leader-in-Charge:	
Name(s) of Unit(s) camping:	
Venue of Camp:	
Date Camp begins:	Date Camp ends:
Place where swimming will take place:	
PERMISSION IS HEREBY GIVEN FOR THE ACTIVITY AS DESCRIBED ABOVE	
Name and surname of Regional Outdoor Activities Advisor	SIGNATURE:
Date:	

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This form should only be kept until the Camp Return has been completed – the form contains personal information of the Guider in charge and this information is also contained in the Camp return form. Therefore, this form becomes redundant and POPI states that the information can only be collected for as long as it is necessary.