



# Permission to Camp Form.

J.P. Bond 1st - 3rd July 2016.



Name of Scout/Explorer:..... Troop/Unit: .....

Address:.....

Phone No: ..... Date of Birth: .....

I give my permission for my son/daughter to attend: The JP Bond Competition at Hopehill.  
From: Friday 1st - Sunday 3rd July 2016. I can be contacted during the event

at:.....**Phone Number:** .....

Please note if he/she has any disabilities, allergies or sensitivities etc:

.....

Please note if he/she requires a special diet or has special needs:

.....

Details of any Medication: .....

Date of last Tetanus injection (if Known):.....Blood Group (if Known).....

Name & address of G.P.: .....

G.P. Tel No:.....National Health Service No (if known): .....

Should it become necessary for my son/daughter to receive medical treatment and I cannot be contacted to authorise this, I hereby give my general consent for any necessary medical treatment to be given and authorise the Leader in charge to sign any document required by the medical authorities.

Signed Parent/Guardian: ..... Date: .....

Name (Printed): .....

Please add any extra or relevant details on back of this form - please tick here if you have ( )

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Continued overleaf:

**THE SECTION BELOW MUST BE COMPLETED BY YOUR SCOUT/EXPLORER LEADER**

I confirm that the Scout/Explorer named on this form is adequately skilled & equipped to operate safely for the duration of this event and that they are current members of the Scout Troop/Explorer Unit.

Name:(Print).....Name:(Sign).....

Date: ..... Appointment: SL/ASL/GSL/ESL.....

**PLEASE BE AWARE:** ANY SCOUT/EXPLORER NOT PROVIDING THIS FULLY COMPLETED PC FORM (COMPLETED BY BOTH PARENT/GUARDIAN AND SCOUT/EXPLORER LEADER) AT THE START OF THE EVENT WILL NOT BE PERMITTED TO ATTEND THE EVENT.

Additional information

