

# Nights Away Information Form – Explorer Hike & Sleepover 1<sup>st</sup>-2<sup>nd</sup> July 2017, Belchamps

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Event: Explorer Camp

Dates: 1<sup>st</sup> July – 2<sup>nd</sup> July 2017

Location: Belchamps Scout Activity Centre, 2 Holyoak Lane, Hockley Essex, SS5 4JD

Meeting place and time: Hiking to Belchamps & returning on the Minibus to Rugby Club car park at 4pm

Cost: £30

Organiser and contact details: Judy Cohen 01268 693382/07719938291  
Yvette Billings 07732792973

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 Associations 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 Judy Cohen/Yvette Billings by:

Name of young person:.....D.O.B.....

Event:.....

I enclose a cheque/cash for £ 30 (please make cheques payable to Night Hawk Explorers)

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.

Emergency contact:.....Phone:.....

Doctors name and contact details: Details of any medications currently

..... Being taken:

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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 documents required by the hospital authorities.

Signed:.....

Date:.....Relationship to young

person:.....