

Activity Information Form



Event: Camp on Rathlin Island **Date:** 14/07/2017
Location: Rathlin Island
Meeting place and time: Ballycastle Harbour
Collection place and time: Ballycastle Harbour
Cost: £25
Transport details: Travel by ferry to the island from Ballycastle. Departing 1pm on Friday 14th July, returning at 3:30pm on Sunday 16th July
Wear / Bring: Travel in scout uniform and scarf
Further details: On the website
Organiser and contact details: Richard Taylor, 07818047517
Contact details during the event: Deborah Barton, 028 207 68155

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 _____ by _____

Name of young person: _____ **D.o.B:** _____

Event: _____

*I enclose a cheque / cash for £ _____ (please make cheques payable to _____)
I have noted the arrangements above and agree to the named young person taking part.*

Is he/she able to swim 50 metres and stay afloat for five minutes in light clothing? Yes / No

Emergency contact: _____ **Phone:** _____

Doctor's name and contact details: _____ **Details of any medications currently being taken:** _____

Details of any disabilities or additional 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.