

2nd Gilwell Park Fellowship

Supporting Gilwell Park Campsite

Visit
Form

Junior Service Team

This form is to be completed in respect of any under-18 year-old who is to help at Gilwell Park. A form must be completed on each occasion, and signed by the parent / guardian. The completed form must be handed to a member of campsite staff or their nominee on arrival. All activities are run in accordance with the Scout Association's safety rules. NO responsibility for personal equipment, clothing and effects can be accepted by Gilwell Park, and the Scout Association DOES NOT provide automatic insurance cover in respect of such items. Please contact the Campsite if you require further information, and hand this form in to the Duty Manager when you arrive.

Permission to attend Gilwell Park Campsite

I give permission for _____ to attend Gilwell Park Campsite,
from _____ (arrival date) to _____ (departure date)

My son/daughter HAS/HAS NOT * any known allergies/sensitivities, disabilities or special dietary requirements. If he/she has, please give full details of precautions and remedies:

Date of last tetanus immunisation _____

National Health Service number _____ Date of Birth _____

Name and address of own doctor _____

_____ Telephone _____

My contact details during this time are:

Address: _____

_____ Postcode _____

Daytime telephone _____ Evening telephone _____

I will inform you if he/she is in contact with any infectious diseases within three weeks of the visit; and if any medicines/diet etc. have to be taken/followed whilst at Gilwell, and with the hospital concerned if under current treatment. If he/she has to take pills/medicine, I will hand them to you clearly marked with their name and the exact dose. If it becomes necessary for my child to receive medical treatment and I cannot be contacted by telephone or other means to authorise this, I hereby give my general consent to any necessary medical treatment and authorise the Campsite Manager or their nominated deputy to sign any document required by the hospital authorities.

Members of the Guide Association: We will inform the Guide District Commissioner in advance of the visit.

Signed _____ (Parent/Guardian)

*please delete as appropriate

Note:

The medical profession takes the view that parent's consent to medical treatment cannot be delegated. This view is explicit in the Child Act 1989. Thus medical consent forms have no legal status and a doctor/nurse insisting on the consent of a parent to particular treatment has the right to do this. For this reason we do not recommend that Leaders insist on parents signing the statement above. However, it can be a comfort to medical staff to have general consent in advance from parents, or to have a Leader on hand able to sign forms required by medical authorities.

Return this form at least two weeks before the start date to: The Campsite Manager, Gilwell Park Campsite, Bury Road, Chingford, London E4 7QW