

# CAMP/HOLIDAY INFORMATION - ADULTS

Please complete legibly in black ink.

Please return the lower section of this form, completed

& signed by .....

Form to be returned to: .....

Address .....

.....

.....

Telephone .....

Group

Event .....

Taking Place At .....

From .....

To .....

OS Sheet Number (6 fig grid ref) .....

The Home Contact if necessary is;

Name .....

Address .....

.....

.....

Additional Information ( events / activities / notes )

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.....

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 camp organisers and The Scout Association does not provide automatic insurance cover in respect to such items

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## *This part to be returned to the Camp Leader*

I will be attending the camp/holiday on .....

at .....

I have/have not been in contact with any infectious diseases within the last 3 weeks. (Please give details if possible)

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.....

Date if last Tetanus Immunisation.....

Medicines currently being taken

.....

Please give details of any allergies to food, medicines or other

.....

.....

Please give details of any special dietary needs

.....

.....

Please give details of any special needs

.....

.....

I can / can not swim 50 metres and tread water.

Name/address & telephone number of own Doctor:

.....

.....

Date of Birth .....

My next of kin details are :

Name .....

Address.....

.....

.....

Tel ..... Mobile .....

I understand that the camp leader reserves the right to send any participants home if necessary. If it becomes necessary for me to receive medical treatment and my next of kin cannot be contacted by telephone or any other means to authorise this, I hereby give my general consent to any necessary medical treatment and authorise the Scouter in charge of the camp to sign any document required by the hospital authorities.

Signature .....

Date .....

Note: Medical consent forms have no legal status and a doctor/nurse insisting on the consent of next of kin for a particular treatment has the right to do so. For this reason we do not recommend that Leaders insist on this form being signed as above. However, it can be a comfort to medical staff to have general consent in advance from next of kin or to have a Leader on hand able to sign forms required by the medical authorities.