



26/02/2018

Dear Parent / Guardian

**Extended Cub Sleepover – Saturday 17th March - Sunday 18th March 2018
Penicuik Scout Halls, 40 Kirkhill Road, Penicuik EH26 8JB**

Dropoff: Saturday 17th March 2018, 2pm to 2.30pm

Pickup: Sunday 18th March 2018, 9.30am

Location: Penicuik Scout Halls, 40 Kirkhill Road, Penicuik EH26 8JB
Google Maps Link: <https://goo.gl/maps/KKRU8WJWR1q>

Cost: £8.00

How to sign-up

My.Scout – Our New Portal which lets you:

- Signup to Events, View Cubs badges Cubs have completed, view/update details; See an archive of Emails sent.
- You should have received a link in your email, inviting you to your Childs Pages, please check your spam folder, or other Tabs on Gmail, any problems email gsl@bonnyriggscouts.uk

Sleepover forms are NOT required. Parents are required to update the additional information at the bottom of the Personal Details screen.

Otherwise, you can still signup by returning the form attached.

The deadline for signing up and paying is Thursday 15/03/2018

Payment Methods:

Cash or Cheque in an envelope, with Childs Name

Cheques Made Payable to "14th Midlothian Bonnyrigg Scout Group"

BACS Transfer:

Sort Code: 60-83-01

Account No: 20370121

Reference: Childs Name

Please note this is NOT the account membership fees/Subs are paid into

14th Midlothian Bonnyrigg Scout Group – The Scout Association

Group Scout Leader: Richard Fairbairn

12 Pinewood Road, Mayfield, Dalkeith EH22 5JB

Tel 07791 599707 **Email** gsl@bonnyriggscouts.org.uk

Website www.bonnyriggscouts.org.uk

Twitter www.twitter.com/bonnyriggscouts **Facebook** www.facebook.com/bonnyriggscouts

Scottish Charity No: SC018097



Sleepover Contact

Sharon Montgomery 07484383401 (Nights Away Leader)

Richard Fairbairn 07791599707 (Group Scout Leader)

Kit List – **All Items must be marked with the Young Person's name.**

On Saturday afternoon, we will be going a walk along the Railway Walkway, so it is essential that the Cubs bring warm waterproof jacket and clothing and suitable footwear. It is however flat and easy to walk on.

- Uniform (To be worn)
- Change of clothing including underwear/t-shirt/trousers/Jumper
- Sleeping Bag
- Foam Sleeping Mat / Inflatable Mat (and pump)
- Night ware
- Jacket
- Small rucksack type bag for carrying water, snack etc
- Warm waterproof jacket
- Shoes / Boots for walking in.
- Warm Hat, Gloves and Scarf.
- Trainers
- Toiletries
- Torch
- Teddy
- Please pack in a Sports Bag.
- No electronic Items should be brought.
- A **small** amount of sweets can be brought, please no fizzy juice

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 of such items

Cubs Extended Sleepover at Penicuik Young Person Form

This part must be returned to your Leader by date in covering letter.

I give permission for:

Full Name _____

Address _____

Telephone _____

Date of Birth _____

Pack Night _____

GP Name _____

GP Address _____

GP Telephone _____

During the Sleepover I can be contacted at:

Name _____

Address _____

Telephone _____

Mobile _____

To attend the Cubs Sleepover at Penicuik Scout Halls,
40 Kirkhill Road, Penicuik EH26 8JB from Sat 17th
March to Sunday 18th March 2018

Has she/he been in contact with any infection diseases with the last 3 weeks?

Date of last tetanus immunisation

Does she/he have any special dietary needs?

Details of any medications currently being taken (Please continue overleaf if necessary)

Details of any disabilities, conditions, allergies, special needs or cultural needs that might affect this event (Please continue overleaf if necessary)

*I understand that photographs / video may be taken of my child and may be made viewable on a Scout Association Website / Press or Scout Association Social Media (eg Facebook / Twitter). No names will be associated with the images.

*** Please delete the above if permission is NOT given.**

I accept that the Scout Association will be keeping information about my son's/daughter's participation in the camp for Scouting purposes and purely for the safe running of the camp.

I give explicit consent to the holding of information of my son's/daughter's health & disabilities; again for Scouting purposes and the safe running of the camp.

I understand that the Camp Leader reserves the right to send any participants home if necessary. If it becomes necessary for my child to receive medical treatment and I cannot be contacted by telephone or any other means to authorise this, I hereby give 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 of Parent/Guardian

Date

Note: The medical profession takes the view that the parent's consent to treat cannot be delegated. This view is explicit in the Children Act 1989. Thus medical consent forms have no legal status and a doctor/nurse insisting on the consent of a parent to a particular treatment has the right to do so. 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 the general consent in advance from parents or to have a leader on hand able to sign forms required by medical authorities.

CONFIDENTIAL