

Some additional permission forms required for the commercial activity providers will need to be filled in as well at a later date.

Provisional kit list is found below. All participants will be camping in tents.

65litre quality rucksack  
3 or 4 season sleeping bag  
Camping mat  
Survival bag  
Stuff pillow (optional)  
Personal First Aid kit and wash kit  
LED head torch plus spares Water-proof matches  
1 Spork (knife fork spoon in one)  
Plastic or metal Plate / mug / bowl  
Personal Hygiene items  
Changes of Underwear  
Emergency Chocolate - no nuts

3 black bin bags  
2 teatowel  
Snack food  
2 spare pairs hiking socks  
Change of clothes to sleep in  
1 Chamois Towel  
Full Water Drinks Bottle  
MEDICATION IF ANY  
6 sheets of neatly folded news paper

3 complete change dry clothes  
packed in separate bag bus.

Clothes to Wear - Uniform

Waterproof coat and over trousers  
2 x Polyester or Wool Thermals  
Wick away top  
Hike (Scout) trousers—NO DENIMS  
Fleece or wool jumper  
Gaiters (optional but recommended)

Good Gloves, Warm hat  
Additional warm fleece or jacket to wear in camp  
Additional clothing if you feel the cold.

Wet Clothes for watersports  
Rash vest or thermal top  
shoes to get wet and muddy (for sailing, canoeing and Kayaking)  
Polyester fleece  
Swim wear  
Polyester jogging bottoms

It will be difficult to dry so if you object to wearing wet clothes pack two sets

Large Dry Bag for canoe expedition  
Medium Dry bag for Sleeping bag



# Summer Camp 2010



Cost approx.  
£240



We unfortunately had to cancel the Nottingham camp this year. We have replaced it with a local camp based near the Mournes. The Camp will run from Sunday 1st August through to Sunday 8th August.



Participants will have the opportunity to complete part of the Royal Yachting Association's stage 1 sailing course (those who already have stage one will be able to progress with other stages. We hope to start the stage one course during the summer term so that participants can gain



their certificates at the Camp or early in the Autumn term.

The camp will also feature a Canadian canoe expedition on Strangford Lough with an overnight stay on one of the islands. The expedition will be run by Mobile Team Adventure, a company the group have had a long association with, and who employ some of the best Canoe

and Kayak coaches in the country. We will also be using Tollymore Mountain Centre as an activity provider and will be visiting their High Ropes course and using their instructors for abseiling and rock climbing / climbing wall depending on ability. Further excitement will come in the form of mountain boarding, where all scouts and explorers will learn how to get from the top to the bottom of the mountain board course.



Other activities will include off road mountain biking (own bikes to be brought), an orienteering provisions challenge, a camp fire meal challenge and a few surprise activities for good measure. There will be a number of evening activities and outings. Cost is approx. £260 per person with all activities included.



## Provisional Itinerary

### Sunday 1st

Arrive - set up camp

Lunch

Kayaking / Maze / Safety briefing - Castlewellan Lake (TBC)

### Monday 2nd

Sailing - Craigavon

Evening visit to Newcastle

### Tuesday 3rd

High Ropes - Tollymore

Climbing - Tollymore

Evening - Canoe Expedition

### Wednesday 4th

Camp on Island

Canoe Expedition

Canoe Expedition

Cooking Competition

### Thursday 5th

Free time

Orienteering Hunt

Wild camping

### Friday 6th

Hike

Archery

### Saturday 7th

Mountain Boarding

Off Road Biking

Camp party

### Sunday 8th

Pack up

Home

Some details may change. Explorers and older scouts will have some alternative activities:-

## Medical Consent Form page 2

The Camp / Trip / Activity Leader (or in their absence one of the assistant Camp / Trip / Activity leaders named overleaf) may administer the appropriate minor treatment/precautions (as listed below) if required. Please delete or add alternatives as appropriate

Headaches  Paracetamol or similar.....

Stomach upset  Please specify.....

Cuts & grazes  Antiseptic, sticking plaster .....

Stings  Anthisan cream.....

In the space below please give details of anything not already mentioned including the following:-

- Any Known Infectious Diseases with which the person named overleaf has been in contact within the last three weeks (e.g. Chicken Pox, Diphtheria, Measles, Mumps, Rubella, Whooping Cough etc.)
- Any Known Allergies/Sensitivities/Disabilities and details of any known precautions or remedies (e.g. Penicillin, Food Colourings, Travel Sickness, Bed-wetting, Asthma etc.)
- Details of any Medicines/Diets/Treatments currently being Taken/Followed (including dosage details) & the Specialist and Hospital concerned if appropriate (please include any non prescription preparations, such as cough sweets, herbal medicines).

(If He/She has to take any Medicine's, the bottle(s), jar(s) or other items should be clearly labelled with their name and the exact dosages, and should be packed in an accessible Daysack Pocket and the Group Leader / Group First Aider given written information on medicine and dose carried.)

### Medicine Carried on Trip (to be clearly labelled with Name, Dose, etc)

Condition.....

Medicine.....Dose.....

Condition.....

Medicine.....Dose.....

Condition.....

Medicine.....Dose.....

Other information

## Booking Form



## Lisburn Cathedral Scout Group

### Summer Camp

August 1st to August 8th 2010

Leaders in Charge Andrew Stacey  
George Griffin

I confirm that I wish the person named below to take part in the Group Summer Camp based in the Mournes

\_\_\_\_\_ (name of young person)

Date of Birth \_\_\_\_\_

Cost is estimated at £240

We have already paid a deposit for the Cancelled Nottingham camp and wish to transfer payment

I enclose a non-refundable deposit of £100

I enclose post dated cheques of £70 each for the balance dated 1st May and 1st June 2010

I intend to pay the balance by the following method.

Cash/Cheque  Fundraising

I understand that any outstanding balance not paid by Tuesday 1st June 2010 \* may result in my child losing their place and that any money already paid cannot be refunded.

Parent / Guardian :- \_\_\_\_\_

Date:- \_\_\_\_\_ Signed :- \_\_\_\_\_

\*except any additional excess due to increased costs not confirmed until June 2010

# Activity Permission & Medical Consent Form

Trip :- Lisburn Cathedral Scout Camp to Mournes  
Date:- 1st - 8th August 2010  
Leaders in Charge :- Andrew Stacey (M) 07710 196949  
George Griffin (M) 07812050232  
Activity Leaders :- As available or as provided

Participant Name

D.o.B.

National health Number

Home Address

.....  
.....  
.....  
Tel:.....  
Mobile.....

Emergency Contact During Trip (This must not be anyone attending)

Name.....  
Address (if Different).....  
.....  
Tel:..... Mobile.....

Family Doctors Name  
.....Address.....  
.....  
.....Tel:.....

**Known Allergies**  
 Penicillin  Nuts  Wasp sting  Other.....  
.....

**Is your child diagnosed with any of the following conditions**  
 Autism  ADHD  Aspergers  Other.....  
**Do you think there is a need for additional Adult supervision whilst taking part in activities because of this condition.**  Yes  No

Can the participant swim confidently. Yes  No

Date of last Tetanus injection.....

## Parental / Guardian's Consent for under 18s only

**I hereby give permission for my child to attend the 2010 Summer Camp. I give permission for my child to participate in all planned activities. Risk assessments for all planned activities are on the group web site <http://www.scoutcentre.com>.**  
**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 my general consent to any necessary medical treatment and authorise the Camp / Trip / Event leader named over the page (or in their absence one of the assistant Camp / Trip / Activity leaders named over the page), to sign any document required by the hospital authorities. I will inform the Camp / Trip / Activity Leader if any of the information given on this form changes before the event takes place.**

Name of Parent / Guardian

Relationship to young person

Signed

Date