



# Camping And Outdoor Activity Application

## Instructions:

1. This application is *to be completed by the Group Committee* on behalf of any section planning to undertake any Camping or Outdoor Activity. **NOT** for use with Tours, Visits & Fundraisers.
2. A separate form is to be used for each outing.
3. When the application and checklist have been completed and the Group Committee approves the event, they sign their approval on the bottom of this form.
4. Upon approval, a signed copy is forwarded along with the Camping/Outing plan and related permission forms (provided by the leader) to the office of your Council Executive Director for filing. NOTE: For international camps, complete and include Scouts Canada's Tour Permit (See *B.P.&P.*, Section 20000 ).



## Scouts Canada Camping And Outdoor Activity Application

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Application for the Camp or Outdoor Activity is made on behalf of the:

☐ Colony    ☐ Pack    ☐ Troop    ☐ Company    ☐ Crew

Group: \_\_\_\_\_ Area: \_\_\_\_\_ Council: \_\_\_\_\_

Camp/Outing Date(s): \_\_\_\_\_ Duration of Outing: \_\_\_\_\_

Expected Attendance: Beavers: \_\_\_\_\_ Cubs: \_\_\_\_\_ Scouts: \_\_\_\_\_ Venturers: \_\_\_\_\_ Rovers: \_\_\_\_\_ Adults: \_\_\_\_\_

Scouter in Charge: \_\_\_\_\_ Phone: (Home): \_\_\_\_\_ (Work): \_\_\_\_\_

Home Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Leaders attending (attach list if insufficient space):

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Parents attending (attach list if insufficient space):

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Volunteer Helper / Resource Person attending (attach list if insufficient space, check as per *B.P.&P.*, Section 3001 for Screening Level Chart):

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_ PRC verified: ☐

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_ PRC verified: ☐

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_ PRC verified: ☐

Location of Camp or Outing:

Facility Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Description of Program:

Route Plan Including Campsites (if applicable):

Mode of Transportation: ☐ Vehicle ☐ Bus ☐ Train ☐ Plane ☐ Boat/Canoe ☐ Bicycle ☐ Hiking ☐ Other: \_\_\_\_\_

Distance to Travel: \_\_\_\_\_

Group Committee Approval: \_\_\_\_\_ Date: \_\_\_\_\_



# Scouts Canada Safety Checklist

**To be completed by the scouter in charge** of any section applying to go Camping or on an Outing in accordance with Scouts Canada's Policies and Procedures.

**Directions:** Check off each box as the conditions are met. When all boxes are checked, sign the bottom of this form and pass it to the Group Committee for approval. The Checklist and Application, once approved by the Group Committee, is then submitted to the office of your Council Executive Director.

## First Aid/Emergency

- ☐ At least 1 adult present with First Aid certification and equipment/kit appropriate for outing. Where Scouts or Venturers are camping or participating in activities without adults present, at least one member present has appropriate first aid certification and appropriate equipment/kit for the camp/activity.
- ☐ Emergency Plan including communications and procedures developed.
- ☐ Level of risk associated with outing assessed and evaluated.
- ☐ Directions to nearest doctor or medical facility established.
- ☐ **Scouts Canada Physical Fitness Certificate for each participant on hand.**
- ☐ Safe drinking water available or appropriate treatment device.
- ☐ Accident reporting/recording procedures and form.

## Planning and Program

- ☐ Scouts Canada's *By-Law, Policies and Procedures* are being followed.
- ☐ Activity meets needs of youth involved and is age-appropriate for the section.
- ☐ Government and Scouts Canada's regulations complied with.
- ☐ Area being visited has been checked or researched for suitability.
- ☐ Appropriate personal hygiene planned for outing.
- ☐ Nutritional menu taking into account food allergies.
- ☐ All equipment in good repair and appropriate for outing.
- ☐ Proper consideration given to propriety for Co-ed camps/outings.

## Communication

- ☐ Parents/Guardians have been appropriately briefed regarding the nature of the activities, the preparation required and potential risk associated with the activity.
- ☐ Group Committee notified and approves of activity.
- ☐ *Scouts Canada Parent/Guardian Consent Form* on hand for each youth attending.

**NOTE: A camping/outing plan including: route, timetable, destination, list of participants, description of the event, sketch map and directions for locating the group has been provided with this Activity Application to the Group Committee, and upon approval, to the office of your Council Executive Director.**

## Training

- ☐ At least one adult has the necessary skills and training appropriate for the outing.
- ☐ Where Scouts or Venturers are camping or participating in activities without adults present, at least one member present has the necessary skills and training appropriate for the outing.
- ☐ Youth have received appropriate training/preparation for the outing.

**Scouter in Charge, Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_