



**ERIK THE RED ESU**

## **Duke of Edinburgh Bronze Practice Expedition**

**South Downs, Saturday 7<sup>th</sup> October – Sunday 8<sup>th</sup> 2006**

# **CONSENT and HEALTH form**

This programme involves 2 unsupervised group hikes along the relatively modest landscape of the South Downs, and an overnight stay in a Scout campsite.

**Name of Explorer Scout Unit:.....*Erik the Red ESU*.....**

**Name of Explorer Scout :.....**

**Address:**

**Date of birth:**

**Post Code:**

**Parents telephone number :**

**Alternative number:**

**National Health Number:**

**GPs name, surgery address and telephone number.**

**Details of any allergies (including food, drug, or other allergies) medical conditions or infections:**

**Any medications required, please give clear instructions:**

**Date of last tetanus injection:**

**Special dietary requirements:**

**Brief details of hill walking/hiking/climbing experience, if any:**

**I have read and noted the weekend programme and arrangements and consent to:**

.....taking part in the weekend's activities and agree that medical and dental treatment may be given to my son/daughter if necessary, including the administration of a general anaesthetic and to surgical operations in the case of emergency, in accordance with the recommendation of a qualified medical practitioner. Every endeavour will be made in these circumstances to contact the parents without delay.

**All activities will be run in accordance with The Scout Association Policy Organisation and Rules.**

**Signed:**

**Name:**

**(Parent/Guardian)**

**Date:**