



Nights Away Permission Form

This part is to be retained by the parent/guardian. The lower part of this form should be completed by the parent/guardian and returned to the Section Leader by the date shown.

Section	BEAVERS	CUBS	SCOUTS
Planned activity			
Date from		Date to	
	Location		
Meet at (location)			Time
			hrs
Collect from (location)			Time
			hrs
Cost		Cheques made payable to	North Banbury Scout Group
			required by
Transport arrangements	Please bring/wear...		
	See Attached kit list		
Additional information			
Home Contact			Telephone
			Mobile

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

Planned activity			Name of young person		
Name of Doctor			Tel no		
			Date of Tetanus Immunisation		
Medicines currently being taken			Does he or she have any allergies to medicine, food or other?		
(Medicines must be clearly labelled with persons name, name of drug, storage requirements, frequency, dosage).					
Does he or she have any special needs?			Does he or she have any special dietary needs?		

Please use the back of this form if more space is needed to answer any of the questions

Main contact Telephone / mobile for this event			Second contact Telephone / mobile for this event		
Please indicate preferred method of communication	Landline	<input type="checkbox"/>	Mobile Call	<input type="checkbox"/>	Mobile Text
				<input type="checkbox"/>	

I enclose the cost of the activity Cash Cheque (please indicate by ✓)

I understand that the Event 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 my general consent to any necessary medical treatment and authorise the Leader in charge of the camp to sign any document required by the hospital authorities

Signed			Date		
Relationship to young person					

Note: The medical profession takes the view that the parents consent to medical treatment cannot be delegated. This view is explicit in The Children Act 1989. Thus, medical consent forms have no legal status and a doctor or 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 general consent in advance from parents or to have a Leader on hand able to sign forms required by medical authorities