



# Scouts Canada Camping and Outdoor Activity Application

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): \_\_\_\_\_ (Cell): \_\_\_\_\_

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

**Leaders attending:**  
(attach list if insufficient space)

**Activity Leader/Parent/Guardian's attending:**  
(attach list if insufficient space)

Name: _____	Name: _____
Name: _____	Name: _____
Name: _____	Name: _____
Name: _____	Name: _____
Name: _____	Name: _____
Name: _____	Name: _____
Name: _____	Name: _____
Name: _____	Name: _____
Name: _____	Name: _____

**Volunteer Helper / Resource Person attending (attach list if insufficient space, check as per B.P.&P., Section 3001.2 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 Commissioner Approval: \_\_\_\_\_ Date: \_\_\_\_\_



# Scouts Canada Safety Checklist

**To be completed by the scouter in charge** of any section applying to go Camping or on an Outdoor Activity 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 Commissioner for approval. The Checklist and Application, once approved by the Group Commissioner, 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 Program Participant Enrolment Form or Application for Membership and Appointment of Volunteers form 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.
- Applicable government (municipal, provincial and federal) 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 (for Category Three activities or Out-of-Country Travel only).

**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 Commissioner, 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:** \_\_\_\_\_

# EMERGENCY PLAN

## Event

Activity: \_\_\_\_\_  
\_\_\_\_\_

Location: \_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

## Important numbers

Scouter in Charge: \_\_\_\_\_ (cell phone)  
Police, Fire, Ambulance 911  
Poison Control 1-800-268-9017 (Ontario)

## Hospitals

Hospital name: \_\_\_\_\_

Hospital Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Directions: \_\_\_\_\_

\_\_\_\_\_  
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\_\_\_\_\_

## First Aid

First Aiders are \_\_\_\_\_.

## Communication Plan

- Leaders have cell phones.
- The group will be notified in the case of an emergency by the 3 long whistles.
- In the event of a specific emergency, the Scouter in Charge must be notified prior to a participant leaving the event (with a parent and possibly a leader) for the Hospital.
  
- Location of Muster Point: \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## Incident Report Forms

- Forms are located with \_\_\_\_\_.

## Action Plan

- In the event of a physical injury one of the designated First Aiders or most qualified person available will take control until medical personnel arrive.
- In the event that a participant goes missing and a preliminary search of the camp area is not successful, all participants will gather at the Muster Point.
- Attendance is taken, and a search party (2 leaders) is sent out with authorities being contacted if and when necessary.
  
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_