2015 World Jamboree Application Form



Surname:	Forenames:	Date of Birth:
Address (inc Postcode):		
N		
Home telephone Number:		
Mobile (Young Person):		
Mobile (Parents/Guardians):		
Email address (Young Person):		
Email address (Toding Ferson).		
Email address (Parents/Guardia	ns):	
Originating Scout Group:		
Current Unit/Group:		
•		
	amboree (the applicant must complete this sec	
box provided. No supplementary sneets	are to be used. Typed or word processed application	ons will be rejected).

What is your favourite thing about and/or favourite time in Scouting and why? (the applicant must complete this section in their own handwriting, and in the box provided. No supplementary sheets are to be used. Typed or word processed applications will be rejected).
I am the person to represent Sevenoaks District at the Jamboree because (the applicant must complete this section in their own handwriting, and in the box provided. No supplementary sheets are to be used. Typed or word processed applications will be rejected).
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In the event of the selection weekend being over-subscribed, the answers to the above questions will be used to select initial candidates.

Group Declarations:

I confirm that the above Scout / Explorer has the Group and I am happy to act as a referee for thi	• •
Signature:	Date:
Print Name:	Position in Group:
Parent / Guardian Declarations:	
I give permission for to take particle and supervised in accordance with the Policy Organisation Association.	
I hereby give permission for my child to attend the Jambo training and fundraising activities prior to the Jamboree	ree, the selection weekend, and any associated
If it becomes necessary for my child to receive medical tre- contacted by telephone or any other means to authorise t consent to any necessary medical treatment and authoris document required by the hospital authorities.	his, I hereby give my general
I confirm that I have instructed my child to wear a seatbel	t at all times whilst in vehicles.
I have signed and enclose the Data Protection Act Certific	cate.
I have signed and enclose the Swimming Certificate.	
Name of Parent/Guardian:	Relationship to Young Person:
Cianatura	Deter
Signature:	Date:

Membership Records – Data Protection Act

The Scout Movement in the United Kingdom is a membership organisation. To enable it to operate – and to communicate with its members – it is necessary to maintain records about them.

This will include keeping details of name; address; date of birth; contact telephone numbers. We will also keep details of your son's / daughter's progress through Scouting (badges obtained etc.). Information held may at times be shared within Scouting, including the Headquarters of the Association.

Legislation came into force in March 2000 covering the protection and processing of personal data. Adults and young people have the same rights under the Data Protection Act. The Act covers paper based (as well as computer based) information. Certain information is classed by the law as 'Sensitive Personal Data'. In a Scouting context this may include information about your son's / daughter's:-

- Health. (to ensure that we are prepared for medical emergencies)
- Disabilities (to ensure a safe integration of your son's / daughter's participation in activities)
- Religious or similar beliefs
- Racial or ethnic origin (to help us to ensure that we are sensitive to cultural needs of our members)

To hold this 'Sensitive Personal Data' we will need your explicit consent. I would be grateful if you would provide this by completing and returning the declaration below. The information will only be used in connection with your son's / daughter's membership of the Scout Movement in the United Kingdom – this will include membership management and communications.

None of the information provided will be passed to any third parties outside the Scout Movement without your consent.

Declaration			
daughter's memb	enoaks District Scouts will be keep ership of the Scout Movement for ng of information of my son's / dau faith; race / ethnic origin for Scou	Scouting Purposes I give explicit ughter's health; disabilities; religion /	
Signed	Print Name	Date	

Swimming Certificate

The Scout Association's rules governing water activities require specific standards of swimming ability for members of the Association using certain types of boat. I would therefore be grateful if you would complete and sign the declaration below.

<u>Declaration</u>		
I certify that my son/daughter light clothing, and is able to stay afloat for five		
I confirm that I have read and understood the information provided (via the Parent Information pages on www.14thtonbridge.org) about Weil's Disease and Blue-Green Algae.		

Please do not alter or qualify the above declaration. If you are unable to sign it in its current form, then you should not do so. Swimming ability will not affect the Jamboree selection process.

Authority to Fly

The Scout Association's rules governing air activities require specific consent for members of the Association participating in airborne activities. I would therefore be grateful if you would complete and sign the declaration below.

<u>Declaration</u>	
I agree that my son/daughter, k Association, may fly as a passenger or under instruction in se gliders and microlights, and may participate in pa	ervice or civilian aircraft, including
I understand that flying activities are undertaken using the Pol Scout Association, and that air activities will only take place w leader or commissioner.	

Please do not alter or qualify the above declaration. If you are unable to sign it in its current form, then you should not do so.