



- TEAM APPLICATION FORM -

Please return your completed application forms to:
High Adventure 2009, The Spinney, Walton Road, Kimcote, Lutterworth,
Leicestershire, LE17 5RU

The closing date for applications is 15/02/09

Please make cheques payable to "Leicestershire Scout Council".

TEAM DETAILS:

Team name: _____

Explorer unit: _____

Explorer leader(s): _____

(Each team should be supported by one responsible leader (not necessarily their own leader) who should complete a separate Team Support Leader application form which should be returned with this team application form).

TEAM LEADER:

Name (1): _____

Date of Birth: ___ / ___ / ___

Address: _____

Postcode: _____

Telephone: _____

Email: _____

TEAM MEMBERS:

Teams must be formed of a minimum of five and maximum of six Explorer Scouts (including the team leader)

Name (2): _____

Date of Birth: ___ / ___ / ___

Name (3): _____

Date of Birth: ___ / ___ / ___

Name (4): _____

Date of Birth: ___ / ___ / ___

Name (5): _____

Date of Birth: ___ / ___ / ___

Name (6): _____

Date of Birth: ___ / ___ / ___

SIGNATURES:

I have read and understand the rules of High Adventure 2009. I understand that the organisers decision is final. I enclose the entry fee of £40.00 per participant. Completed health forms for each member of my team are enclosed.

Team leaders signature: _____ Date: ___ / ___ / ___

I give permission for this Explorer Scout team to enter High Adventure 2009. They will be accompanied by a responsible Team Support Leader (please complete and return a separate Team Support Leader application form). The team will be prepared for the event with appropriate navigation, walking and safety training / experience.

Explorer leaders signature: _____ Date: ___ / ___ / ___

Office use only:

Application checked and accepted Team entry fee received: £ _____
 Team Support Leader application form received Team number: _____