



Application to hold a Beaver Scout Sleepover

Who needs to complete this form?

- the leader of the Sleepover
- the Group Scout Leader
- the Home District Commissioner
- the Host District Commissioner (if the Sleepover is held outside the Groups' Home District)

Completed forms should be sent to the Home District Commissioner at least two months before the Sleepover is due to take place.

Why you should complete this form

1. By a visit from the Host District Commissioner (or nominee) the Scout Movement is able to maintain a high standard for Sleepovers.
2. It establishes a personal contact for local support in the area of the Sleepover.

All parts of the form should be completed in BLOCK CAPITALS.

Sleepover Leader to complete this section

Colony/Group name

Scout District

Scout County/ Area

Date of Sleepover
from to

Sleepover Leader's details

Name

Address
Postcode

Telephone number

Scouting appointment

Accommodation details

Name of owner

Address of venue
Postcode

Venue phone number

Expected numbers at Sleepover

	Male	Female
Beaver Scouts		
Leaders		
Other Adults		
Others under 18		



Form PS(BS) RETURN SLIP

Beaver Scout Sleepover

Host District Commissioner to complete this section

Name

Address
Postcode

Telephone number

I acknowledge receipt of your Form PS(BS) and your outline programme for the Activity to take place in my District

From To

(Tick box where appropriate)

I am satisfied with your arrangements

My comments are enclosed

I enclose further details of the venue and surrounding area

Local advice is available from

Signature

Date

List of Key Staff

1. Name
Scouting Appointment

2. Name
Scouting Appointment

3. Name
Scouting Appointment

If necessary, please continue on a second sheet

Home contact

(must be available during Sleepover)

Name
Address
Postcode
Telephone day
Telephone night

I, (Sleepover Leader) confirm that:
(Tick box to confirm)

1. I have visited and inspected the accommodation/area and found it satisfactory
2. I will obtain a parent's written permission for each member (under 18 years) attending the Sleepover
3. I am conversant with and accept The Scout Association's current rules as in POR, and Guidelines for Beaver Scout Sleepovers
4. I have completed Leadership One Training for Beaver Scout Leaders (or local equivalent) and the Sleepover Training Module

What you should do now

Once you have completed this section of the form, attach a cheque/postal order to the value of **£3.00** made payable to '(Name of District) District Scout Council' together with your outline programme and a stamped self-addressed envelope. Then pass the form on to your Group Scout Leader and District Commissioner for completion.

Group Scout Leader to complete this section

I confirm the above details and am satisfied with the knowledge, skills and attitudes of those going on the Sleepover.

Signature

Date

Home District Commissioner to complete this section

(Tick box to confirm)

1. I approve this application
2. The location seems suitable
3. I am satisfied with the knowledge, skills and attitude of those leading the Sleepover
4. I am satisfied that rules relating to the Sleepover are understood
5. I have examined the outline programme and am satisfied with the content and supervision proposed

Name
Address
Postcode
Telephone number
Signature
Date

Now send this form to the Host District Commissioner.

If the Sleepover is to take place in the Home District, complete the tear-off slip