

February Freezer Camp 2012



Denham Lane, Chalfont St Peter, Bucks. SL9 0QJ
Tel 01753 882640 Fax 01753 884108
Email: steve@chalfont.org
Website www.chalfont.org

Information for group leaders

Welcome...

We are looking forward to welcoming you to our 2nd February Freezer Camp. To make your arrival and departure as smooth as possible please read through the information below.

For Health and Safety reasons we discourage people from arriving before 2pm on the Friday; however you can set up your camp the day before if you so wish.

What to expect...

Traffic management will be in place from 17.00hrs on Friday - however, the event does not open until 21.00hrs. Groups may pitch their tents on the Thursday if they wish.

Equipment is left at your own risk.

Arrivals and parking:

If your group are arriving individually, please ensure that you have given each individual details of your group's whereabouts.

This helps us to find out if the rest of the party has arrived and where they are pitched. We will have a designated meeting point located outside the main reception and this is where you must meet your group. Please encourage your group to share lifts if this is the case in order to cut down on traffic to and from the site.

Registration and reception:

Reception is located within the Providore and is clearly signposted.

You MUST register before pitching your camp.

- **To assist with smooth running, we ask that only a single representative books your group in.**
- **To register you will need your Booking Confirmation, and either cash or cheque or card to pay for a maximum of three additional people. (Cheques should be made payable to 'GLMW Chalfont A/C.)**
- **Please note that refunds cannot be given for lower numbers of attendees as activities will have been arranged for the numbers booked.**
- **On arrival you will be issued with a pack containing ID cards and lanyards, and other useful information.**

Camping:

If your group arrives after 9pm then you MUST contact the duty manager before pitching your camp. Finally, if your group has any special needs with regard to their camping location, please ensure you contact us in advance. We may not be able to accommodate your needs otherwise.

February Freezer Camp 2012



Denham Lane, Chalfont St Peter, Bucks. SL9 0QJ
Tel 01753 882640 Fax 01753 884108
Email: steve@chalfont.org
Website www.chalfont.org

Activities:

Activities will start at 10am and finish at 8.00pm on Saturday, with a designated lunch break between 12.30pm and 1.30pm. On Sunday activities will run from 10am to 1pm. Because of the nature of some events, participants may get particularly muddy, so please ensure that your group have adequate changes of clothes and shoes. Certain activities require parental permission in order to participate and permission forms must be signed by the parent or guardian for an individual to Participate. On the Saturday and Sunday we may limit participation on the most popular activities through the use of ID cards in order to ensure everybody has equal opportunity. Evening activities will run on both evenings and further detailed information will be on the website before the event. These are likely to include a disco, wide game and camp fire.

Additional information:

First aid will be available throughout the weekend; first aiders will be based next to the reception area.

For further information before the event keep checking the website www.chalfont.org or email steve@chalfont.org.

Please take time to talk to us during the weekend and let us know your opinions on any aspect of the event. The Paccar Scout Camp Staff and Service Team want you to have the best weekend you possibly can. If you encounter anything that requires our attention, please let us know immediately so that we can sort it out for you there and then.

February Freezer Camp 2012



Denham Lane, Chalfont St Peter, Bucks. SL9 0QJ
Tel 01753 882640 Fax 01753 884108
Email: steve@chalfont.org
Website www.chalfont.org

Freezer Camp Booking Form

Booking Group Name: _____

Leaders Name: _____

Address: _____

Post Code: _____

Telephone Number: _____

E-Mail Address: _____

Total Number Participants: _____

Total Number Leaders: _____

Costs: - Participant Costs £30.00 - Leader Costs £18.00 - Meal Deal £15.00

T Shirt Sizes, Badge Orders, & Meal Deals

Youth small _____

Adult X Large _____

Youth Medium _____

Adult XX Large _____

Youth Large _____

Adult XXX Large _____

Adult Small _____

Total Number of T shirts _____

Adult Medium _____

Total Number of Badges _____

Adult Large _____

Total Meal Deals _____

Total Monies Sent £

**All camping & meal deal fees must be paid to GLMW Chalfont A/C
All cheques must reach Paccar Scout Camp no later than January 31st 2012
Signed Parental forms for each applicant under 18 years must accompany your payment**

PACCAR Scout Camp is owned and operated by
Greater London Middlesex West Scout Council
For the benefit of all young people
Registered Charity 303887

February Freezer Camp 2012



Denham Lane, Chalfont St Peter, Bucks. SL9 0QJ
Tel 01753 882640 Fax 01753 884108
Email: steve@chalfont.org
Website www.chalfont.org

Parental consent form

Activities Parental consent form – Activities

To be returned with the full amount of £30.00 per person for camping & activities

To be returned with the full amount of £15.00 per person meal deal offer

This form must be returned with full payment by January 31st along with Leaders booking form

Booking Group Name: _____

ID number:..... (Allocated by site) Site Number Allocated

I give permission for.....to take part in the following activities which may be on offer:

Giant Table soccer, Archery, Abseiling, Rifle Shooting*, Climbing Wall, Pedal Karts, Traversing Wall, Crate Stacking, Caving Ladder, High Ropes, Bouncy Castle, Pole Joust, Bucking Bronco, Body Zorb, Inflatable assault, Laser Quest, Quad Bikes, Bungee Run.

** I declare that he/she is not subject to restriction by virtue of Section 21 of the Firearms Act 1968 (which applies only to persons who have served a term of imprisonment or youth custody)*

Please state if your son/daughter has a disability or condition which may be affected by the activities:

Name:.....

Signature:.....

(Parent/guardian)

(I give permission, and child is over 12)