



Scouts
Humberside

Artificial Top Rope Training Course
Information and Booking Form

Date	27 th & 28 th April 2019	Venue	Raywell Scout Activity Centre
Time	Day 1 – 10am – 8pm Day 2 – 9.30am – 4pm	Cost	£20.00 includes Sat evening meal and Sunday breakfast

WHO	Adult members and Explorers wanting to progress to permit level
CONTENT	<p>Provides participants with the skills to</p> <ul style="list-style-type: none"> • run a climbing session using a top rope • rig Raywell climbing wall <p>Practical and theory sessions covering</p> <ul style="list-style-type: none"> • Rigging Raywell wall • Climbing techniques • Scout Association rules • Safety and risk assessing • Equipment management • Assessment criteria <p>Following attendance on the two-day training course participants with little or no previous experience will be encouraged to take opportunities to build and log experience with other permit holders prior to applying for assessment</p> <p>Experienced climbers please email log book and permit application if applying for assessment</p>
JOINING INSTRUCTIONS	<p>Participants must attend the full weekend</p> <p>Non – uniform.</p> <p>Course is partly indoor and partly outdoor.</p> <p>Suitable outdoor wear and footwear required for climbing</p> <p>Change of footwear for indoors</p> <p>Saturday evening meal & Sunday breakfast & General refreshments provided</p> <p>Bring packed lunch for Saturday and Sunday (fridges available)</p> <p>Bring tent if staying over and arrive early to set up. (Course is planned with a Sat evening session so will be late finish)</p> <p>Preparation:</p> <p>Read scout association rules and fact sheets for climbing</p> <p>Read assessment checklist</p>

To Book complete & email attached form to Mike Connor, mike.connor@gycscouts.org.uk

Booking Form

Artificial Top Rope Training Course

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Participant Information

PARTICIPANT NAME	SCOUT MEMBERSHIP NUMBER / DOB if UNDER 18
HOME ADDRESS	SCOUT ROLE & GROUP
TELEPHONE NUMBER	EMAIL ADDRESS

Emergency Contact Information

In the event of an emergency please contact	
NAME	RELATIONSHIP
ADDRESS	Telephone Number 1
	Telephone Number 2

Additional Information

DISABILITIES/ADDITIONAL NEEDS <i>Allows us to consider needs and tailor the course and equipment accordingly if possible.</i>
FOR RESIDENTIAL COURSES PLEASE ADD ANY FOOD ALLERGIES / NEEDS
MEDICAL CONDITIONS & MEDICATIONS

If it becomes necessary for me to receive medical treatment, I hereby give my general consent for any necessary medical treatment and authorise the Leaders / Instructors named above to sign any document required by the medical authorities.
(add cross in the box)

Previous Experience

<p>Please give brief outline.</p> <p>NB. Experience is not essential but we need to understand the level so that the course can be tailored. Attach log book if experienced.</p>
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Under 18

I agree to my son / daughter taking part in the above event

Signature Parent / Guardian _____ Date: _____