



Easter Venture 2017

14th to 17th April

IT'S MORE THAN JUST A HIKE, SWIM OR SAIL!



PO Box 357, BROOKLYN PARK, SA, 5032

EMAIL: easterventure@sa.scouts.com.au

<http://www.easterventure.sa.scouts.com.au>

<https://www.facebook.com/pages/Easter-Venture/234233143302479>

EV Pre Event Hotline: 0407 711 479 Emergency number only during EV 0424 213 299

Participant Application

Easter Venture (EV) is a 4 day Branch competitive hike for Venturers, older Scouts, and Guides.

EV is a team event and you will hike in teams of four to seven. The minimum of 4 participants per team will be strictly applied for your safety. All members of your team must stay together.

Need a team? Let us know, Individuals, twos and threes from different Troops and Units will be formed into groups of 4-7 for Easter Venture Team.

There are eight perpetual trophies including - Hike Trophy, Camp Award and Overall Trophy. There is also a Theme Award kept by the team that puts the most effort into the theme of Easter Venture. This year the theme is 'LOST AT SEA', so start planning now and dress up in a theme outfit and get in the swim. EV2017 will be held at the Caroon Creek Conservation Park near Mount Bryan East - a great hiking area with plenty to challenge the best Guide, Scout and Venturer Hikers!

There will be 2 categories for the hike trophy: Full Pack and Day Pack. Your team may choose to hike with full packs (all your gear) or use day packs. Your whole team must choose which category you will be competing in before the start of the event.

This year's Easter Venture will also incorporate a Branch Initiative Course and the opportunity for you to complete parts of Venturer Award Outdoor or Queens Scout Outdoor Light Weight Bushwalking—see the website for details.

Equipment

The total gear weight limit is 16kg per person. [Day Packers! this means that the total gear that you bring to EV must weigh less than 16kg.] All gear should be in a single rucksack or sports bag. (The maximum weight to carry is 1/4 of your body weight for slight build people, or 1/3 of your body weight for heavier build Venturers).

Each team must have enough tents (hootchies and bivvy bags are not sufficient) and sleeping bags for each member of the team. Male and female Venturers must have separate tents.

You will need to bring all your food, with the exception of Sunday Tea, which is supplied.

You are responsible for all of your rubbish - You will be taking all rubbish and food packaging that you bring to Easter Venture back to Adelaide. No fires or stoves for cooking are allowed but hot water for evening meals will be supplied. You will need billies for collecting hot water.

All teams and participants must carry enough gear to be self-sufficient for each day.

You will not be allowed to start each day of EV without the mandatory equipment!

Your daypack should be large enough to carry all of this, plus a groundsheet, your lunch and scroggin.

Mandatory Equipment	
Individual	Team
Waterproof rain jacket	Group First Aid Kit
Whistle	Compass
2 litre water bottle(s)	Notepaper and pencil
Personal first aid kit	Sunscreen
Sun Hat	Emergency Shelter
Warm jumper and beanie	

Equipment (cont.)

Wear well-worn footwear! Do not bring **new** shoes/boots to EV. Tape potential sore spots before walking.

Maps will be provided (bring a map cover). All members of the team need to be able to use a map and compass to navigate.

Drinking water is provided at the lunch spots and evening campsites only.

Every venturer needs to carry a personal first aid kit containing at a minimum:

- Roller bandage
- Roll of blister tape
- Blister pads/Blister Block/Second Skin/ moleskin
- Personal medication (painkillers etc.)
- Band-aids
- Snake-bite Compression bandage

Fee Structure

Venturer Participants: \$80 (Before **Fri 03-Mar-2017**) or \$100 (After **Fri 03-Mar-2017**) Leaders: \$35

Includes transport, camp fees and Sunday evening meal.

Cheques/money orders should be made payable to 'Scouts SA – Venturer Section – Easter Venture'.

Direct Deposits are also available: Scouts SA (Venturer Section)

BSB: 105-011 Account number: 103104340

Use "EV17-surname" as your reference. Please send confirmation of payment to

easterventure@sa.scouts.com.au

Time Line

Applications close: Early bird (**Fri 03-Mar-2017**), All applications: **Fri 24-Mar-2017**.

EV2017 starts at 7:30am on Good Friday (**14 April 2017**) at the Gawler Scout Hall – Jarvis Street, Gawler

EV2017 concludes at 1:30pm on Easter Monday (**17 April 2017**) at the Gawler Scout Hall – Jarvis Street, Gawler

Eligibility

All Participants need to be competent in the Outdoor Skills required by the Venturing Skills Award or its equivalent. Age limit: All youth members participating in EV must be 14 or before Friday 14th April 2017 and under 18.

How To Apply

All Participants (Youth members and adults) send a Participant Application Form to the address listed at the top of page 1. All applications must be received and full payment made prior to the closing date. Each participant must enter the names of their team members.

If you do not have a team we can place you in one.

Refund Policy

All withdrawals and requests for refund must be in writing.

Withdrawal before the Closing Date: Full Refund

Withdrawal more than 5 days before the course or event: Full refund less an administration charge

Withdrawal less than 5 days before the course or event: No Refund

Exceptional circumstances will be considered by the Leader-in-Charge for that course or event

ASK FOR EASTER VENTURE INFO at
Cosmic Explosion (South) Fri 17-Feb-2017
Cosmic Explosion (North) Fri 24-Feb-2017

Participant Application Form – Easter Venture 2017

Please complete all sections to enable information to be accurately entered into the system

PERSONAL DETAILS

SURNAME	GIVEN NAMES	
PREFERRED / SCOUT NAME	GENDER M / F	DATE OF BIRTH
ADDRESS		POSTCODE
PHONE NUMBER	EMAIL	
SCOUT GROUP	LEADER	

ROLE

VENTURER
 GUIDE
 SCOUT
 ROVER/LEADER

ROVER/LEADER ONLY;

Do you have an appointment with Scouts Australia? YES / NO If YES, Appointment held: _____
 If NO, have you completed an Adult Helper Application and had a police check? YES / NO
 Will you be staying? YES / NO If YES, Campsite: _____

CONTACT DETAILS FOR PARENT/GUARDIAN / EMERGENCY CONTACT

Are there any custody issues of which the EV Organisers should know? YES / NO
 Please discuss these with EV Admin.

EMERGENCY CONTACT

	PARENT 1 / GUARDIAN 1	PARENT 2 / GUARDIAN 2
NAME		
ADDRESS		
CONTACT PHONE		
MOBILE PHONE		
EMAIL		

Team Name: _____ Team Leader: _____

I am not in a team yet, please place me in one. I have indicated my preferences below.

Day Pack	Full Pack	Go Hard (Competitive)	Combo	Easy (Activities Only)
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Team Participant Name	Unit	Contact Phone #

This year's Easter Venture will also incorporate an Initiative Course and the opportunity for you to complete parts of the Venturer Award Outdoor or Queen's Scout Outdoor – see the website for details. Options:

- I wish to take part in the Initiative Activity (**limited to the first 20 paid applications received by EV Admin**)
- I wish to undertake VA Outdoor – Lightweight Bushwalking
- I wish to undertake QS Outdoor – Lightweight Bushwalking

DIETARY REQUIREMENTS

Does the applicant have any special dietary requirements? (For health, religious or cultural reasons only).

<input type="checkbox"/> Vegetarian	<input type="checkbox"/> Vegan	<input type="checkbox"/> Halal
<input type="checkbox"/> Kosher	<input type="checkbox"/> Lactose / Dairy Free	<input type="checkbox"/> Gluten Free
<input type="checkbox"/> Diabetic	<input type="checkbox"/> Other (please specify): _____	

HEALTH AND WELFARE

Medicare Number:	Ambulance Fund:
Private Health Fund:	Health Fund Membership Number:

Tetanus Immunisation Date: _____

Does the applicant have any illness, condition or disability? YES / NO

Does the applicant wear a Medic alert bracelet or medallion? YES / NO

Please tick:

<input type="checkbox"/> ADD / ADHD	<input type="checkbox"/> Autism / Asperger's	<input type="checkbox"/> Migraine
<input type="checkbox"/> Allergy – Drug	<input type="checkbox"/> Intellectual Disability	<input type="checkbox"/> Asthma
<input type="checkbox"/> Allergy – Food	<input type="checkbox"/> Diabetes	<input type="checkbox"/> Epilepsy
<input type="checkbox"/> Allergy – Insect	<input type="checkbox"/> Heart Condition	<input type="checkbox"/> Physical Disability
<input type="checkbox"/> Other (please specify): _____		

Please provide details on a separate sheet. If confidential attach in a sealed envelope.

Will the applicant be requiring any medication during the Event? YES / NO

Medication	Dose/Frequency	Illness/Condition

AGREEMENTS AND AUTHORITIES

Medical

I agree not to make a claim against Scouts Australia (SA Branch) beyond the level of insurance provided by their policies (see explanation below). I authorise any member or other official representative of Scouts Australia (SA Branch) to obtain any medical or dental attention or treatment, or ambulance assistance, considered necessary (or expedient) for the applicant. I agree to reimburse Scouts Australia (SA Branch) for any expenses incurred as a result which are not covered by the Association's insurance policies.

Explanation of Scout Association Insurance

Scouts Australia (SA Branch) maintains insurance policies designed to cover Adult/Youth Members during Scouting service. For further information you should consult with your Group Leader or relevant Commissioner to ascertain the exact level of cover of these policies.

Consent to Use of Image

I consent to photographic / video images of me / my child being taken at Scout activities and being used for promotional purposes by and for Scouts.

Privacy Policy

Scouts Australia (SA Branch) has always respected the privacy of its members and customers and understands the importance you place on the protection of person information in its care. Scouts Australia (SA Branch) has a Privacy Policy which conforms with current Commonwealth legislation and copies of this are available from us on request, or from our website. From time to time we may contact you to offer you products or services.

APPLICANT'S STATEMENT

I wish to attend Easter Venture. I understand the Promise and Law and agree to follow the rules of the Event.

Signature of Applicant: _____ Date/...../.....

APPROVALS (if under 18)

Parent / Guardian 1: _____ Date/...../.....

Parent / Guardian 2: _____ Date/...../.....

The participant's Guide, Scout or Venturer Leader is required to I certify that this Venturer/Participant is of Venturing Skills Award standard or equivalent. Venturer Leaders are required to confirm that all necessary Award Scheme approvals are attached.

Guide, Scout or Venturer Scout Leader: _____ Date/...../.....