

HAMLET WOOD SCOUT CAMPSITE BOOKING REQUEST



Name of Group		District
Name of Leader in	Charge/Appoint	tment
Address		
Tel:	Mob:	Email
Name of Nights Aw	ay Permit Hold	er
Date of Arrival		Estimated Time
Date of Departure		Estimated Time
Number of: Beaver	rs Cubs	ScoutsExplorersNetwork
Rainbows Bro	ownies Gu	uides Rangers/Young Leaders
Adult Leaders	. Others	TOTAL
Type of Event/Activ	vity:	
Building Hire: Ker	neth Loveland	Training Centre / Vanstone HQ (delete as req)
Patrol Sites (qty)		Cutbush Field / Cobtree Field
Climbing Tower:	Yes/No	if yes, Date/Time
Name of Auth	orised Leader	
Camp Fire Circle:	Yes/No	if yes, Date/Time
Chapel:	Yes/No	if yes, Date/Time
Equipment Hire De	tails:	
•	-	tand and keep to the site rules. I also understand that it assessment is carried out for all hazardous activities.
Signed		Appointment Date
Please return this form	ı to - bookings@l	hamletwood.org.uk