



# APPLICATION FORM

**ONE APPLICATION FORM IS REQUIRED FOR EACH TEAM ENTERED**

**CLOSING DATE SUNDAY 8th MARCH 2020**

FOR OFFICE USE ONLY	
Date Form R'ecd	
Date Pymnt R'ecd	
Team No	

Name of Scout Troop/ Explorer Unit\* : \_\_\_\_\_

District \_\_\_\_\_ County: East Sussex / West Sussex\* (Delete as applicable)

The entry fee is £55 per team. Refunds will not be given if teams are withdrawn after the closing date.

Payment can be made by bank transfer using the following account details:

Bank Name: **Barclays**                      Sort Code: **20 – 49 - 80**                      Account Number: **80092754**

All bank transfers to have reference in following format OH20 followed by first 8 digits of Troop/Unit name e.g. 1st Gilwell Scout troop would be: OH201Gilwell.

I have made a bank transfer for £\_\_\_\_\_ Using the following reference \_\_\_\_\_

OR  
By cheque, I have enclosed a cheque for £\_\_\_\_\_ payable to East Sussex County Scout Council.

Teams will not be entered into the event until both application forms and payment have been received.

Application forms complete with one FIRST CLASS (Large Letter postage rate) stamped self-addressed, A5 (210mm x 150mm) envelope to be sent to Mark Lloyd c/o Overland Hike, 25 Lexden Drive, Seaford. E. Sussex BN25 3BD

**Scout / Unit Leader**

1. I have read and fully understand the "Information and Rules" and agree to abide by them.
2. I am satisfied that all team members will be up to an acceptable standard by the date of the Hike, and that they have also read and fully understand the Information Sheet and Rules and have agreed to abide by them.
3. I have confirmed that all team members are aware of any medical conditions within the team.
4. I also confirm that the parents/guardians of each Scout/Explorer have given permission for their child to take part.

SIGNED \_\_\_\_\_ Scout/Unit Leader

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ (in capitals please)

\_\_\_\_\_ Post Code \_\_\_\_\_

Tel No \_\_\_\_\_ Mobile No \_\_\_\_\_

Email address \_\_\_\_\_

**Emergency Home Contact For The Duration of the Hike**

This person must be contactable all times during the Hike. If a land line is not available 2 mobile numbers will be required. The home contact must not be related to a member of the team nor be a leader that is assisting on the Hike in any way.

Name \_\_\_\_\_

Address \_\_\_\_\_ (in capitals please)

Tel No 1 \_\_\_\_\_ Tel No 2 \_\_\_\_\_