



# Boy Scouts of the Philippines

## National Office

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17 April 2017

### NATIONAL OFFICE MEMORANDUM

No. 26 , Series of 2017

TO : Regional Scout Directors  
Council Scout Executives  
Officers-in-Charge

SUBJECT : 6<sup>th</sup> ASEAN Scout Jamboree



1. The ASEAN Scout Association for Regional Cooperation (ASARC), thru the Boy Scouts of the Philippines (BSP), is pleased to announce the holding of the **6<sup>TH</sup> ASEAN SCOUT JAMBOREE** on **27 November – 2 December 2017** at the **Energy Park, Apokon, Tagum City, Davao del Norte** with the theme, "**Growth and Stability.**"
2. **Aims and Objectives.** The Jamboree aims to provide a progressive, safe and enjoyable learning environment for the Scouts in order to enhance their physical, social, mental, emotional and spiritual potentials. At the end of the Jamboree, the participants should be able to:
  - 2.1. Promote ASEAN Community and Solidarity;
  - 2.2. Promote the highest quality of Scouting, one that is faithful to the mission, principles and method of Scouting and adapted to the needs and aspirations of young people;
  - 2.3. Undertake high-adventure activities, including community service projects related to the current thrusts of World Scouting (Environment Education, Peace Education and Development Education) through the different World Programmes under the Better World Framework - Messengers of the Peace (MoP) Initiatives, World Scout Environment Programme (WSEP) and its ancillary programs (Scouts Go Solar, YUNGA Challenge Badges), and the Scouts of the World (SW) Award Programme;
  - 2.4. Undergo projects, programs and activities that will cater to the fulfillment of the requirements of selected merit badges and scout ranks under the Advancement Scheme;
  - 2.5. Develop core life skills and 21<sup>st</sup> century leadership capabilities through team building, cooperative learning, group dynamics, creative problem-solving and decision-making skills;
  - 2.6. Keep oneself abreast with the prevailing issues about the environment, human rights, health, education, culture and science and technology through the Global Development Village, City of Science and Cross Roads of Cultures, among others.

3. **Qualifications.** The following are the qualifications for the participating Scouts and Adult Leaders, viz:

3.1. A **Scout** is expected to have leadership potentials, sufficient camping experience, and physically fit to undergo strenuous activities with corresponding parent's consent and:

- Must be currently registered as a Boy or as a Senior Scout
- Must be at least nine (9) to twelve (12) years old for Boy Scouts and twelve (12) to seventeen (17) years old for Senior Scouts
- Must be equipped with camping gears

3.2. Participating **Adult Leaders** must have the maturity and clarity about his/her role and:

- Must be currently registered
- Must be physically fit as certified by a physician
- Must be of good moral character
- Must be equipped with camping gears
- Preferably a Bead Holder or graduates of Advanced Training Courses (ATC)

4. **Registration Details.** Stated below are important information regarding the Jamboree Registration System and Procedure, viz:

4.1. **Registration Fee.** A Registration Fee of **FIVE HUNDRED PESOS (PhP 500.00)** shall be charged from each of the participants in order to defray administrative costs, program materials, souvenir items and other operating expenses.

4.2. **Registration Deadlines.** The following registration deadlines shall strictly be enforced:

PHASE	DESCRIPTION	PERIOD	
		Start	End
Phase 1	Pre-Registration of Contingents	17 April 2017	14 July 2017
Phase 2	Confirmation of Participation	17 July 2017	31 July 2017
Phase 3	Remittance of Payment	7 August 2017	15 September 2017

**THE REGISTRATION WILL END BY 1159H OF 15 SEPTEMBER 2017. NO REGISTRATION WILL BE ACCEPTED AND PROCESSED BEYOND THE SAID DATE.**

4.2.1. **PHASE 1 – Pre-Registration of Contingents (17 April – 14 July 2017)**

During this phase, all Local Councils who wish to participate in the Jamboree must **electronically (via email)** complete and submit to the BSP National Office, the following Jamboree Forms:

- Jamboree Form No. 02 – IST Application Form
- Jamboree Form No. 03 – Contingent Registration Form
- Jamboree Form No. 04 – Roster of Contingent Management Team
- Jamboree Form No. 05 – Roster of Participants

**No payment shall be remitted during this phase, only the required jamboree forms,** as identified above. This will determine the strength of participation of each Local Council, depending on the quota allocation per Scout Region.

The participation as identified in the jamboree forms will undergo scrutiny and review thru the National Project Management Team to ensure that the standards of participation are met (adult and participant ratio, required number of the CMT, etc.).

**The participation must strictly conform to the quota allocation and the participant ratio.**

**To preclude any logistical problems and complications, the Pre-Registration will DETERMINE THE ACTUAL NUMBER OF PARTICIPANTS of each Local Council and/or Scouting Region, consistent with the quota allocation.**

#### 4.2.2. **PHASE 2 – Confirmation of Participation (17-31 July 2017)**

The Phase 2 of the registration refers to the general review of participation of each Local Council in order to ensure that proper allocation of participants based on the required participant ratio and allowable number of adults to be included in the Contingent Management Team.

Accompanying adults in excess of the required participant ratio and members of the CMT will not be allowed.

Once participation is found to be consistent with the Jamboree Registration Policy, a **Notice of Confirmation** will be sent by the National Project Management Team to each Local Council, detailing the required payment and the authorizing remittance of payment per allowed number of participants.

#### 4.2.3. **PHASE 3 – Remittance of Payment (7 August – 15 September 2017)**

The last phase of the registration is the remittance of payment. The details of the registration, as well as the corresponding fee will be reflected in the Notice of Confirmation which will be sent by the National Project Management Team directly to the Local Council.

**Remittance of registration will be done in bulk, per Local Council. Only the Local Council is allowed to remit the registration fee. No individual registration fees should be remitted to the Jamboree account.**

Registration Fees must be paid directly to the host council [Tagum City Council] via bank transfer, to the official Jamboree account, with the following details:

<i>Account Name</i>	<b>BSP Tagum City Council</b>
<i>Current Account Number</i>	<b>00-0-50044-916-0</b>
<i>Bank Name</i>	<b>Development Bank of the Philippines</b>
<i>Branch</i>	<b>DBP Tagum</b>
<i>Swift Code</i>	<b>DBPHPHMM</b>

The **SCANNED COPY** [not photo taken] of the bank deposit slip must be electronically transmitted to the BSP National Office at [bsp@scouts.org.ph](mailto:bsp@scouts.org.ph), with a copy furnished to [tagumcity.bsp@gmail.com](mailto:tagumcity.bsp@gmail.com).

**THERE WILL BE NO ON SITE REGISTRATION AS REGISTRATION WILL CLOSE TWO (2) MONTHS BEFORE THE JAMBOREE. ONLY THE HOST TAGUM CITY COUNCIL IS AUTHORIZED TO COLLECT AND/OR RECEIVE THE JAMBOREE REGISTRATION FEE.**

**Regardless as to whether the total numbers of pre-registered participants have been met or not during the actual conduct of the Jamboree, the registration fee is not refundable, but is transferrable.**

5. **Participant Ratio.** To exercise effective and efficient unit organization and management, a ratio of one **(1) Adult Leader for every nine (9) Boy/Senior Scouts (1:9)** must be observed in the composition of the Jamboree Contingent.
6. **Participation Quota.** The participation to the Jamboree will come from the one hundred twenty one (121) Local Councils and ten (10) Scouting Regions of the BSP, including participation from member-countries of the ASARC and is pro-rated as follows:

REGION	SCOUTS	UNIT LEADERS	CMT	IST	TOTAL
Ilocos Region	360	40	84	35	<b>519</b>
Northeastern Luzon Region	612	68	182	40	<b>902</b>
Central Luzon Region	612	68	140	40	<b>860</b>
National Capital Region	612	68	182	40	<b>902</b>
Southern Tagalog Region	1,125	125	252	60	<b>1,562</b>
Bicol Region	360	40	140	35	<b>575</b>
Western Visayas Region	765	85	98	50	<b>998</b>
Eastern Visayas Region	765	85	168	60	<b>1,078</b>
Western Mindanao Region	2,565	285	168	120	<b>3,138</b>
Eastern Mindanao Region	10,116	1,124	266	400	<b>11,906</b>
International Participants	2,070	230	140	120	<b>2,560</b>
<b>TOTAL</b>	<b>19,962</b>	<b>2,218</b>	<b>1,820</b>	<b>1,000</b>	<b>25,000</b>

The table above has been properly apportioned per international standards of participation. Hence, there will be no additional participation in excess of the allocated quota. Conformity and compliance to the allocated quota and participant ratio will strictly be enforced.

- 6.1. **Scouts and Unit Leaders.** The quota allocation for the Scouts and Unit Leaders is based on 1:9 participant ratio [1 Unit Leader for every 9 Scouts].
- 6.2. **Contingent Management Team (CMT).** Each Local Council must constitute its own Contingent Management Team (CMT). The CMT shall strictly be composed of fourteen (14) Adult Leaders only, each with corresponding responsibilities in their respective Jamboree Contingents.

The CMT is a group of leaders with knowledge and experience in financial management, international travel, care of young people, and international Scouting.

The CMT is also an ideal environment for developing skills in the next generation of leaders.

6.3. **International Service Team (IST).** Each Scouting Region is allocated with specific quota for Adult Leaders and volunteers who wish to serve as part of the International Service Team.

7. **Travel Itinerary.** All Jamboree Contingents are advised to submit their Jamboree Itinerary to their respective Regional Scout Directors for record and reference purposes. Furthermore, all **PARTICIPANTS** are advised to report at the Jamboree Site not later than **0900H of 27 November 2017, Monday** and will only be cleared to leave the camp after the Grand Closing Ceremony.
8. **Application for the International Service Team.** The International Service Team is responsible in supporting the implementation of the different activities, modules and special activities throughout the duration of the Jamboree. It is composed of highly trained, motivated and committed volunteer Rovers and Adult Leaders assigned to the different Jamboree Services, catering to both the program needs and administration requirements.

The members of the IST should be able to communicate in English, and be ready to perform any tasks necessary for the jamboree. In addition, ISTs are required to attend the jamboree as part of the National Contingent and/or Local Council Contingent.

- 8.1. **Qualifications.** Applicants for the International Service Team must meet the following qualifications:
- Must be currently registered as a Rover Scout or as an Adult Leader aged between eighteen (18) to forty (40) years old
  - Must be physically fit as certified by a physician
  - Must be of good moral character
  - Must be at least a Wood Badge Holder with at least one (1) year of experience and service
  - Must be duly recommended by the Council Scout Executive/Officer-in-Charge and the Regional Scout Director
- 8.2. The applicant must completely fill out Jamboree Form No. 02 – IST Application Form, duly endorsed by appropriate authorities. Registration procedures for IST applicants must also confirm with Item 4 of this document.

**Successful applicants will be issued with corresponding Notice of Acceptance from the National Project Management Team. Once approved, all ISTs shall be required to report at the Jamboree Site at not later than 0900H of 24 November 2017, Friday for general orientation, training and preparation. All ISTs shall be allowed to leave the camp by 1700H of 3 December 2017.**

9. **Scout Camps.** In order to maximize the Jamboree experience, **ONLY THE SCOUTS AND THEIR DESIGNATED UNIT LEADER WILL BE ALLOWED TO STAY AT THE SCOUT CAMPS**, following the participant ratio of 1:9.

This will provide a rich learning environment for the Scouts as a form of training for leadership development, character building and responsibility. This is reflective of the

Scout Method as a system of progressive non-formal self-education and mirrors the way where one gains knowledge, skills and attitudes and illustrates Scouting's practical approach to education.

10. **Adult Hub.** The members of the **Contingent Management Team (CMT) SHALL CAMP AND SLEEP AT THE ADULT HUB** located within the vicinity of the Jamboree Site. The CMTs can only stay at the Scout Camp during daytime and before the TAPS to provide support and guidance whenever necessary. Only the designated Adult Leader shall be allowed to stay at the Scout Camps full time with the Scouts.

Hence, contingents are advised to carefully select their respective Adult Leaders that will be assigned per patrol.

11. **Food Provision.** The Jamboree Contingent of each Local Council must provide for their own food and other basic requirements that will be sufficient throughout the entire duration of the Jamboree. Each contingent is responsible in managing their respective kitchens, mess and commissaries. Wet and Dry Markets will be made available at the Jamboree Site in order to ensure the availability of food supplies at reasonable prices.
12. **Jamboree Bulletins.** The National Project Management Team will be publishing and releasing **Jamboree Bulletins** from time to time in order to provide everyone with the latest information and details about the Jamboree, allowing and enabling all participants to adequately prepare for the event.

Jamboree Bulletins will be sent and posted thru various online and social media platforms being handled by the National Office, viz:

<i>Official Website</i>	<a href="http://www.scouts.org.ph/aseanjam">www.scouts.org.ph/aseanjam</a>
<i>Official Email</i>	<a href="mailto:bsp@scouts.org.ph">bsp@scouts.org.ph</a>
<i>Official Facebook Fan Page</i>	6 <sup>th</sup> ASEAN Scout Jamboree ( <a href="https://facebook.com/ASEANjam">facebook.com/ASEANjam</a> )
<i>Official Twitter Account</i>	@ScoutsPH ( <a href="https://twitter.com/ScoutsPH">twitter.com/ScoutsPH</a> )

13. The Regional Scout Directors and Council Scout Executives/Officers-in-Charge are hereby directed to ensure the maximum participation of the Scouts and the Adult Leaders within your respective regions and Local Councils. You are further advised to organize working committees in order to support your respective Contingent Management Teams (CMTs) to ensure the efficient preparation for the events and the smooth relay of information and other details.
14. Should you have any question/s and/or query/ies, you may refer them to the National Project Management Team of the 6<sup>th</sup> ASEAN Scout Jamboree thru the any of following persons:

**DIR. PEDRO B. PENADOS**

Project Officer  
[penadosp@yahoo.com](mailto:penadosp@yahoo.com)  
 (02) 527 8317 local 421

**DIR. SOFRONIO D. HONTANOSAS**

Chief Assistant Project Officer  
[ron.hontanosas@gmail.com](mailto:ron.hontanosas@gmail.com)  
 (02) 527 5112 local 528

**PE KENNY RALPH S. FERNANDO**

Assistant Project Officer for Administration  
[kenny.fernando@scouts.org.ph](mailto:kenny.fernando@scouts.org.ph)  
 (02) 527 5112 local 508

15. For information, guidance, compliance and widest dissemination.



**ROGELIO S. VILLA, JR.**  
Acting Secretary General

Encls. General Programme of Activities  
Jamboree Form No. 01 – Participant's Application Form  
Jamboree Form No. 02 – IST Application Form  
Jamboree Form No. 03 – Contingent Registration Form  
Jamboree Form No. 04 – Roster of the Contingent Management Team  
Jamboree Form No. 05 – Roster of Participants

FOD.SDH/krsf  
NPMT.PBP/SDH/krsf



ASEAN Scout Association for Regional Cooperation  
**6<sup>TH</sup> ASEAN SCOUT JAMBOREE**  
 Energy Park, Apokon, Tagum City, Davao del Norte, Philippines  
 27 November – 02 December 2017  
 Theme: "Growth and Stability"

## GENERAL PROGRAMME OF ACTIVITES

Date Time/Day	27 November 2017 Day 1: Monday	28 November 2017 Day 2: Tuesday	29 November 2017 Day 3: Wednesday	30 November 2017 Day 4: Thursday	01 December 2017 Day 5: Friday	02 December 2017 Day 6: Saturday
0500 – 0600 H	Wake-Up • Wash-Up • Reveille • Morning Routine • Religious Services • Scouts' Own					
0600 – 0700 H	Physical Fitness • Breakfast • Camp Inspection • Flag Ceremony					
0700 – 0800 H	Arrival	<b>6<sup>th</sup> ASEAN Scout Jamboree Modules</b>  1. ASEAN Faith & Belief      6. ASEAN Better World Village 2. ASEAN Crossroads of Culture      7. Sports Festival & Native Games 3. Global Development Village      8. Challenge Valley & Obstacle Course 4. Aquatics and Water Fun      9. Community Service Projects 5. Campcraft & Woodcraft      10. Disaster Risk Reduction Management  • Special Workshop and Module for Adults •			ASEAN Scout's Youth Forum	KAB Scout Olympics Kawan Holiday
0800 – 0900 H	Registration				First Aid & Rescue Olympics	Arena Shows
0900 – 1000 H	Settle-In					
1000 – 1100 H	Camp Development				Trade Exhibition (Swap & Trade)	Cultural Street Dancing Festival
1100 – 1200 H						
1200 – 1300 H	<b>BROTHERHOOD LUNCH</b>					
1300 – 1400 H	Camp Development	<b>6<sup>th</sup> ASEAN Scout Jamboree Modules</b>  1. ASEAN Faith & Belief      6. ASEAN Better World Village 2. ASEAN Crossroads of Culture      7. Sports Festival & Native Games 3. Global Development Village      8. Challenge Valley & Obstacle Course 4. Aquatics and Water Fun      9. Community Service Projects 5. Campcraft & Woodcraft      10. Disaster Risk Reduction Management  • Special Workshop and Module for Adults •			Fancy Drill Competition	Scout Quiz Bee
1400 – 1500 H	General Staff Meeting				Skill-O-Rama	Scout Advancement
1500 – 1600 H	Grand Parade				Scout Rally	Court of Honor
1600 – 1700 H	<b>GRAND OPENING CEREMONIES</b>				Showando	Eagle Scout Conclave
1700 – 1800 H						ATAS Gathering
1800 – 1900 H	Camp Chief's Welcome Reception <b>FELLOWSHIP DINNER</b>					
1900 – 2000 H	Sub-Camp Campfire Wood Badge Reunion	ASEAN Scout's Cultural Night	Gracias' Choir Concert International Youth Fellowship	ASEAN SCOUT'S GOT TALENT (Talent's Unlimited)	Film Showing: BP's Life ASEAN Scout's Youth Jam Concert	<b>GRAND CAMPFIRE AND CLOSING CEREMONIES</b>
2000 – 2100 H						
2100 – 2200 H						
2200 H	<b>TAPS / LIGHTS OUT / SILENCE</b>					



**PARTICIPANT'S APPLICATION FORM****6<sup>TH</sup> ASEAN SCOUT JAMBOREE**

ENERGY PARK, APOKON, TAGUM CITY, DAVAO DEL NORTE • 27 NOVEMBER – 2 DECEMBER 2017

THEME: "GROWTH AND STABILITY"

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Name \_\_\_\_\_  
Family Name Given Name Middle Name

Present Address \_\_\_\_\_

Email Address \_\_\_\_\_ Contact # \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_ Age \_\_\_\_\_

Religion \_\_\_\_\_ Civil Status \_\_\_\_\_ Gender \_\_\_\_\_

Council \_\_\_\_\_ Region \_\_\_\_\_

Sponsoring Institution \_\_\_\_\_

Unit # \_\_\_\_\_ Membership Card # \_\_\_\_\_ Date of Registration \_\_\_\_\_

Position in the Troop/Outfit \_\_\_\_\_ Current Rank \_\_\_\_\_

**PARENT'S / GUARDIAN'S CONSENT**

I understand that the participation in Scouting activities involves a certain degree of risk and can be physically, mentally, and emotionally demanding. I have carefully considered the risk involved and have given consent for myself or my child to participate in this activity. I also understand that participation in this activity is entirely voluntary and requires participants to abide by applicable rules and regulations and standards of conduct. I release the Boy Scouts of the Philippines, the Local Council, the activity coordinators, and all professional staff, volunteers, related parties, or other organizations associated with the activity from any and all claims or liability arising out of this participation.

In case of emergency involving my child, I understand that every effort will be made to contact me. In the event that I cannot be reached, I hereby give my permission to the medical provider selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child. Medical providers are authorized to disclose to the adult in charge examination findings, test results, and treatment provided for purposes of medical evaluation of the participant, follow-up and communication with the participant's parents or guardian, and/or determination of the participant's ability to continue in the program activities.

\_\_\_\_\_  
Signature over Printed Name of Parent/Guardian  
Date \_\_\_\_\_

**ENDORSEMENT OF THE SPONSORING INSTITUTION**

This is to certify that Scout \_\_\_\_\_, is a bonafide member of the Boy Scouts of the Philippines registered in this institution, under the \_\_\_\_\_ Council.

\_\_\_\_\_  
Unit Leader's Signature Over Printed  
Date \_\_\_\_\_

\_\_\_\_\_  
Institutional Head / Representative  
Date \_\_\_\_\_

**APPROVAL OF THE LOCAL COUNCIL****Registration Status**

Reservation Fee: \_\_\_\_\_

Balance: \_\_\_\_\_

Full Payment: \_\_\_\_\_

Date: \_\_\_\_\_

OR No. \_\_\_\_\_

I hereby approve the participation of Scout \_\_\_\_\_  
to the 6<sup>th</sup> ASEAN Scout Jamboree.

\_\_\_\_\_  
Council Scout Executive/Officer-in-Charge  
Date \_\_\_\_\_

# 6<sup>TH</sup> ASEAN SCOUT JAMBOREE

## HEALTH AND MEDICAL RECORD

### HEALTH HISTORY

**Have or subject to (check if yes):**

<input type="checkbox"/> Fainting Spells	<input type="checkbox"/> Palpitation	<input type="checkbox"/> Abdominal Pain	<input type="checkbox"/> Nervousness	<input type="checkbox"/> Shortness of Breath
<input type="checkbox"/> Headache	<input type="checkbox"/> Convulsions	<input type="checkbox"/> Frequent Cough	<input type="checkbox"/> Easy Fatigue	<input type="checkbox"/> Frequent Fever
<input type="checkbox"/> Chest Pain	<input type="checkbox"/> Others: _____			

**Have or subject to trouble with (check if yes):**

<input type="checkbox"/> Eye, Ear, Nose, Throat	<input type="checkbox"/> Hernia
<input type="checkbox"/> Recurrent Diarrhea	<input type="checkbox"/> Heart
<input type="checkbox"/> Hypertension	<input type="checkbox"/> Kidney
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Whooping Cough

**Have had: (check if yes)**

<input type="checkbox"/> Measles
<input type="checkbox"/> Mumps
<input type="checkbox"/> Chicken Pox

**YEAR**

_____
_____
_____

Any condition now requiring regular medication? \_\_\_\_\_

Any restriction of activity for medical reasons? \_\_\_\_\_

Explain \_\_\_\_\_

### IMMUNIZATION

Date of last inoculation

Smallpox	_____
Diphtheria	_____
Tetanus Toxoid	_____

Polio (Short or Oral)  
Others

Date of last inoculation

_____
_____

**If applicant is under 18 years of age:** In the event of illness or injury occurring to my son/daughter during his attendance at the Jamboree, I hereby consent to advance to whatever medical or surgical diagnostic procedure or treatment is considered necessary in the best judgement of the attending physician and performed by or under the supervision of a member of the medical staff furnishing medical services. I understand that, in the event of a serious illness or injury, reasonable efforts to reach me will be attempted.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Applicant

Approved by: \_\_\_\_\_  
Parent or Guardian

### MEDICAL EXAMINATIONS

**TO THE PHYSICIAN:** Your careful examination and written recommendation will encourage personal fitness and safe participation in strenuous outdoor activities. Review health history. If incomplete, please ask that this essential information be provided for your use.

### PHYSICAL FINDINGS

Normal


Eyes  
Vision  
Ears  
Nose  
Throat  
Teeth  
Lungs  
Heart  
Blood Pressure  
Abdomen  
Hernia  
Genitalia  
Extremities  
Posture (Spine)  
Skin  
Urinalysis  
Emotional Stability

Abnormal


Explanation if abnormal

_____
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_____

### IMMUNIZATION (See history)

(Check One)

OK

Needed

Date Given

Smallpox	<input type="checkbox"/>	<input type="checkbox"/>	_____
Diphtheria	<input type="checkbox"/>	<input type="checkbox"/>	_____
Tetanus Toxoid	<input type="checkbox"/>	<input type="checkbox"/>	_____
Polio	<input type="checkbox"/>	<input type="checkbox"/>	_____
Cholera / Dysentery / Typhoid	<input type="checkbox"/>	<input type="checkbox"/>	_____

I certify that I have reviewed the health history and examined this person and find him physically fit to participate in:

<input type="checkbox"/> Camping & Hiking	<input type="checkbox"/> Water Sports	<input type="checkbox"/> Competitive Sports
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Recommendations and/or restrictions (if none, so state): \_\_\_\_\_

Signed: \_\_\_\_\_ Signed: \_\_\_\_\_

Examinee

Physician and License No.

**APPLICATION FOR THE INTERNATIONAL SERVICE TEAM****6<sup>TH</sup> ASEAN SCOUT JAMBOREE**

ENERGY PARK, APOKON, TAGUM CITY, DAVAO DEL NORTE • 27 NOVEMBER – 2 DECEMBER 2017

THEME: "GROWTH AND STABILITY"

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This form must be ELECTRONICALLY transmitted to [bsp@scouts.org.ph](mailto:bsp@scouts.org.ph).Name \_\_\_\_\_  
Family Name Given Name Middle Name

Present Address \_\_\_\_\_

Email Address \_\_\_\_\_ Contact # \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_ Age \_\_\_\_\_

Religion \_\_\_\_\_ Civil Status \_\_\_\_\_ Gender \_\_\_\_\_

Educational Attainment \_\_\_\_\_ Occupation \_\_\_\_\_

Council \_\_\_\_\_ Region \_\_\_\_\_

Sponsoring Institution \_\_\_\_\_

Unit # \_\_\_\_\_ Membership Card # \_\_\_\_\_ Date of Registration \_\_\_\_\_

Present Scouting Position \_\_\_\_\_

Honorable Charge/Appointment \_\_\_\_\_

BTC No. \_\_\_\_\_ ATC No. \_\_\_\_\_ CML No. \_\_\_\_\_ CMT No. \_\_\_\_\_

Section (please put a ✓) ☐ Kawan ☐ Troop ☐ Outfit ☐ Circle ☐ LOA

Council/Regional/National/International Training and Seminars Attended (Title, Date, Venue)

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please give us more information about your knowledge and experiences:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Peace Education    | <input type="checkbox"/> Rock Climbing           | <input type="checkbox"/> Environment Education |
| <input type="checkbox"/> Hiking             | <input type="checkbox"/> Run Group Activities    | <input type="checkbox"/> Canoeing/Rowing       |
| <input type="checkbox"/> Administration     | <input type="checkbox"/> Handicrafts             | <input type="checkbox"/> Swimming              |
| <input type="checkbox"/> Nature Study       | <input type="checkbox"/> Outdoor Activities      | <input type="checkbox"/> Religious Activities  |
| <input type="checkbox"/> Orienteering       | <input type="checkbox"/> Photography             | <input type="checkbox"/> Pioneering            |
| <input type="checkbox"/> Robotics           | <input type="checkbox"/> Music (play instrument) | <input type="checkbox"/> Crowd Management      |
| <input type="checkbox"/> Public Relations   | <input type="checkbox"/> Snorkelling             | <input type="checkbox"/> Lifeguard             |
| <input type="checkbox"/> Computer and ICT   | <input type="checkbox"/> Exhibition Operating    | <input type="checkbox"/> Biking                |
| <input type="checkbox"/> Performing Arts    | <input type="checkbox"/> Journalism              | <input type="checkbox"/> Rappelling            |
| <input type="checkbox"/> Human Rights       | <input type="checkbox"/> Traffic and Security    | <input type="checkbox"/> Health Education      |
| <input type="checkbox"/> First Aid          | <input type="checkbox"/> Radio Operator          | <input type="checkbox"/> Warehouse/Stockroom   |
| <input type="checkbox"/> Basic Life Support | <input type="checkbox"/> Safety and Risks        | <input type="checkbox"/> Logistics             |
| <input type="checkbox"/> Messenger of Peace | <input type="checkbox"/> SWA                     | <input type="checkbox"/> WSEP/Scouts Go Solar  |

<p align="center"><b>CERTIFICATION</b></p> <p>I hereby certify to the correctness and truthfulness of the information stated above.</p> <p align="center">_____ Applicant's Signature over Printed Name</p>	<p align="center"><b>ENDORSEMENT OF THE LOCAL COUNCIL</b></p> <p>Date _____</p> <p>Remarks _____</p> <p align="center">_____ Council Scout Executive/Officer-in-Charge</p>
<p align="center"><b>ENDORSEMENT OF THE REGIONAL OFFICE</b></p> <p>Date _____</p> <p>Remarks _____</p> <p align="center">_____ Regional Scout Director</p>	<p align="center"><b>ACTION OF THE NATIONAL OFFICE</b></p> <p>Date _____ Received _____</p> <p>Verified: _____ Recorded: _____</p> <p align="center"> <input type="checkbox"/> Approved    <input type="checkbox"/> Disapproved    <input type="checkbox"/> Others         </p> <p align="center">_____ Assistant Project Officer for Administration</p>

# 6<sup>TH</sup> ASEAN SCOUT JAMBOREE

## HEALTH AND MEDICAL RECORD

### HEALTH HISTORY

**Have or subject to (check if yes):**

<input type="checkbox"/> Fainting Spells	<input type="checkbox"/> Palpitation	<input type="checkbox"/> Abdominal Pain	<input type="checkbox"/> Nervousness	<input type="checkbox"/> Shortness of Breath
<input type="checkbox"/> Headache	<input type="checkbox"/> Convulsions	<input type="checkbox"/> Frequent Cough	<input type="checkbox"/> Easy Fatigue	<input type="checkbox"/> Frequent Fever
<input type="checkbox"/> Chest Pain	<input type="checkbox"/> Others: _____			

**Have or subject to trouble with (check if yes):**

<input type="checkbox"/> Eye, Ear, Nose, Throat	<input type="checkbox"/> Hernia
<input type="checkbox"/> Recurrent Diarrhea	<input type="checkbox"/> Heart
<input type="checkbox"/> Hypertension	<input type="checkbox"/> Kidney
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Whooping Cough

**Have had: (check if yes)**

<input type="checkbox"/> Allergy
<input type="checkbox"/> Lungs
<input type="checkbox"/> Malaria

<input type="checkbox"/> Measles
<input type="checkbox"/> Mumps
<input type="checkbox"/> Chicken Pox

**YEAR**

_____
_____
_____

Any condition now requiring regular medication? \_\_\_\_\_

Any restriction of activity for medical reasons? \_\_\_\_\_

Explain \_\_\_\_\_

### IMMUNIZATION

Date of last inoculation

Smallpox	_____
Diphtheria	_____
Tetanus Toxoid	_____

Polio (Short or Oral)  
Others

Date of last inoculation

_____
_____

**If applicant is under 18 years of age:** In the event of illness or injury occurring to my son/daughter during his attendance at the Jamboree, I hereby consent to advance to whatever medical or surgical diagnostic procedure or treatment is considered necessary in the best judgement of the attending physician and performed by or under the supervision of a member of the medical staff furnishing medical services. I understand that, in the event of a serious illness or injury, reasonable efforts to reach me will be attempted.

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### MEDICAL EXAMINATIONS

**TO THE PHYSICIAN:** Your careful examination and written recommendation will encourage personal fitness and safe participation in strenuous outdoor activities. Review health history. If incomplete, please ask that this essential information be provided for your use.

### PHYSICAL FINDINGS

Normal


Eyes  
Vision  
Ears  
Nose  
Throat  
Teeth  
Lungs  
Heart  
Blood Pressure  
Abdomen  
Hernia  
Genitalia  
Extremities  
Posture (Spine)  
Skin  
Urinalysis  
Emotional Stability

Abnormal


Explanation if abnormal

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

**IMMUNIZATION** (See history)

(Check One)

OK

Needed

Date Given

Smallpox	<input type="checkbox"/>	<input type="checkbox"/>	_____
Diphtheria	<input type="checkbox"/>	<input type="checkbox"/>	_____
Tetanus Toxoid	<input type="checkbox"/>	<input type="checkbox"/>	_____
Polio	<input type="checkbox"/>	<input type="checkbox"/>	_____
Cholera / Dysentery / Typhoid	<input type="checkbox"/>	<input type="checkbox"/>	_____

I certify that I have reviewed the health history and examined this person and find him physically fit to participate in:

<input type="checkbox"/> Camping & Hiking	<input type="checkbox"/> Water Sports	<input type="checkbox"/> Competitive Sports
---	---------------------------------------	---

Recommendations and/or restrictions (if none, so state): \_\_\_\_\_

Signed: \_\_\_\_\_ Signed: \_\_\_\_\_

Examinee

Physician and License No.

# CONTINGENT REGISTRATION FORM

## 6<sup>TH</sup> ASEAN SCOUT JAMBOREE

ENERGY PARK, APOKON, TAGUM CITY, DAVAO DEL NORTE • 27 NOVEMBER – 2 DECEMBER 2017  
THEME: “GROWTH AND STABILITY”

\*\*\*

This form must be ELECTRONICALLY transmitted to [bsp@scouts.org.ph](mailto:bsp@scouts.org.ph).

### THE NATIONAL PROJECT MANAGEMENT TEAM

c/o Field Operations Division  
Boy Scouts of the Philippines  
181 Natividad Almeda-Lopez Street  
Ermita, 1000 MANILA

Scout Region	
Council	

Hereunder is our summary of participation:

TYPE OF PARTICIPATION	MALE	FEMALE	TOTAL
Participant Scouts			
Unit Leaders			
Contingent Management Team			
International Service Team			
<b>TOTAL CONTINGENT SIZE</b>			

Prepared By:

Noted By:

\_\_\_\_\_  
Council Scout Executive/Officer-in-Charge

\_\_\_\_\_  
Delegation/Contingent Head

\*\*\*

ACTION OF THE NATIONAL PROJECT MANAGEMENT TEAM	
Date _____ Received _____  Verified _____ Quota Allocation Participant Ratio  Total Assessed Fees _____ Posted / Recorded _____	Endorsed for Participation:  <div style="text-align: center;">_____ Assistant Project Officer for Administration</div>
	Approved for Participation:  <div style="text-align: center;">_____ Chief Assistant Project Officer</div>

# ROSTER OF THE CONTINGENT MANAGEMENT TEAM

## 6<sup>TH</sup> ASEAN SCOUT JAMBOREE

ENERGY PARK, APOKON, TAGUM CITY, DAVAO DEL NORTE • 27 NOVEMBER – 2 DECEMBER 2017

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Council

Region

DESIGNATION	COMPLETE NAME	SCOUTING POSITION
-------------	---------------	-------------------

GENERAL ADMINISTRATION		
Contingent Head		
Deputy Contingent Head for Administration		
Deputy Contingent Head for Program		
Deputy Contingent Head for Operations		
Chief of Staff (CSE/OIC)		

ADMINISTRATION GROUP		
Administrative Officer		
Registration and Souvenir		
Logistics and Supply		

PROGRAM GROUP		
Program Officer		
Main Modules		
Special Modules/Ceremonies		

OPERATIONS GROUP		
Operations Officer		
Health, Sanitation and Safety		
Physical Arrangement		

Prepared By:

Noted By:

\_\_\_\_\_  
Council Scout Executive/Officer-in-Charge\_\_\_\_\_  
Delegation/Contingent Head

\*\*\*

**Jamboree Registration Status**

Status of Payment \_\_\_\_\_

Verified By \_\_\_\_\_

Posted/Recorded \_\_\_\_\_

**Sub-Camp Assignment****ADULT HUB****Sub-Camp Director** \_\_\_\_\_

Remarks \_\_\_\_\_

*Important Note:*

The Members of the Contingent Management Team, including all participating adults in excess of the imposed participant ratio are to stay at the Adult Hub. A copy of the Roster of Accompanying Adults and the corresponding deposit slips must be presented to the Sub-Camp (Adult Hub) for the issuance of identification cards, souvenirs and site (camp) assignment.

# ROSTER OF PARTICIPANTS

## 6<sup>TH</sup> ASEAN SCOUT JAMBOREE

ENERGY PARK, APOKON, TAGUM CITY, DAVAO DEL NORTE • 27 NOVEMBER – 2 DECEMBER 2017  
THEME: "GROWTH AND STABILITY"

\*\*\*

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Sponsoring Institution

Address

Council

Region

PATROL 1						
	DESCRIPTION	COMPLETE NAME (please write in PRINT)	AGE	SEX	Current Rank	Position in the Unit
	Adult Leader					
1	Boy/Sr.Scout					
2	Boy/Sr.Scout					
3	Boy/Sr.Scout					
4	Boy/Sr.Scout					
5	Boy/Sr.Scout					
6	Boy/Sr.Scout					
7	Boy/Sr.Scout					
8	Boy/Sr.Scout					
9	Boy/Sr.Scout					

PATROL 2						
	DESCRIPTION	COMPLETE NAME (please write in PRINT)	AGE	SEX	Current Rank	Position in the Unit
	Adult Leader					
1	Boy/Sr.Scout					
2	Boy/Sr.Scout					
3	Boy/Sr.Scout					
4	Boy/Sr.Scout					
5	Boy/Sr.Scout					
6	Boy/Sr.Scout					
7	Boy/Sr.Scout					
8	Boy/Sr.Scout					
9	Boy/Sr.Scout					



PATROL 3						
	DESCRIPTION	COMPLETE NAME (please write in PRINT)	AGE	SEX	Current Rank	Position in the Unit
Adult Leader						
1	Boy/Sr.Scout					
2	Boy/Sr.Scout					
3	Boy/Sr.Scout					
4	Boy/Sr.Scout					
5	Boy/Sr.Scout					
6	Boy/Sr.Scout					
7	Boy/Sr.Scout					
8	Boy/Sr.Scout					
9	Boy/Sr.Scout					

PATROL 4						
	DESCRIPTION	COMPLETE NAME (please write in PRINT)	AGE	SEX	Current Rank	Position in the Unit
Adult Leader						
1	Boy/Sr.Scout					
2	Boy/Sr.Scout					
3	Boy/Sr.Scout					
4	Boy/Sr.Scout					
5	Boy/Sr.Scout					
6	Boy/Sr.Scout					
7	Boy/Sr.Scout					
8	Boy/Sr.Scout					
9	Boy/Sr.Scout					

Prepared By:

Noted By:

\_\_\_\_\_  
Unit Leader's Signature over Printed Name\_\_\_\_\_  
Institutional Head/Representative

Approved By:

**Sub-Camp Assignment** \_\_\_\_\_

Status of Payment \_\_\_\_\_

\_\_\_\_\_  
Council Scout Executive/Officer-in-Charge

Verified By \_\_\_\_\_

Posted/Recorded \_\_\_\_\_