

BOY SCOUTS OF THE PHILIPPINES
National Office
Manila



25 May 2016

NATIONAL OFFICE MEMORANDUM

Number 31 s. 2016

TO : Regional Scout Directors, Council Scout Executives and Officer-In-Charge

SUBJECT : 7th National Scout Venture Camp

1. We are pleased to announce the holding of the 7th National Scout Venture Camp on 25 – 30 September at BSP Camp Danao, Malapuc Norte, Maasin City, with the Theme: "Growth and Stability."
2. The Scout Venture Camp aims to provide opportunities for Senior Scouts to practice and enhance their physical, social, mental, emotional and spiritual potentials. Discover and act upon their strengths through challenging, adventurous and experimental learning activities.
3. Following are the details:
 - 3.1. Qualifications for participation:
 - A. Scout is expected to have leadership potentials, sufficient camping experience, physically fit to undergo strenuous activities with parent's approval and must be:
 - Currently registered as a Senior Scout.
 - 13 years old but not over 17 years old.
 - Holder of at least Pathfinder Rank and,
 - Equipped with camping gears.
 - B. Adult Leader must have the maturity and clarity about his role and must be:
 - Currently registered;
 - Trained as an Outfit Advisor and have served as OA or AOA for at least 2 years.
 - Of good Moral Character.
 - Physically fit as certified by a physician; and,
 - Equipped with camping gears.
4. Registration Details. Stated below are important information regarding the Scout Venture Camp Registration System and procedure.
 - 4.1. Registration Fee. A non-refundable but transferable Registration Fee of **FIVE HUNDRED PESOS (Php 500.00)** shall be charged from each of the participants in order to defray administrative cost, program materials, souvenir items and other operating expenses.

Registration Fees for the Scout Venture Camp must be remitted directly to the host council via bank transfer to their bank account, **SOUTHERN LEYTE COUNCIL LAND BANK SAVINGS ACCOUNT NO. 0941 1071 84** on or before **August 31, 2016**.

The Roster of Participants (see attached), together with the photocopy or scanned copy of the bank deposit slip must be submitted to the host council on the same date via e-mail at southernleyte.bsp@gmail.com.

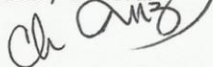
5. Participation Ratio. One (1) adult leader for every eight (8) Scouts is a MUST to exercise efficient outfit leadership management.
6. Participation Quota. The participation to the Scout Venture Camp will come from the one hundred twenty one (121) Local Councils and ten (10) Scouting Regions of the BSP. Quota for Senior Scouts participation per Region is pro-rated as follows:

REGION	SCOUTS
Ilocos Region	100
Northeastern Luzon Region	100
Central Luzon Region	150
National Capital Region	300
Southern Tagalog Region	300
Bicol Region	250
Western Visayas Region	400
Eastern Visayas Region	600
Western Mindanao Region	150
Eastern Mindanao Region	150
TOTAL	2,500

7. Food Provision. The 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 Venture Camp. A camp market will be set up for availability of food supplies.
8. Transportation and Equipment. Contingents will be responsible for arranging their own transportation to and from the campsite. Like in any other camping, Scouts and Adult Leaders are required to provide their own camping equipment and gadgets.
9. It is expected that Local Councils and Regions shall organize their contingents and start preparation without delay. Efforts should be vigorously exerted to promote maximum participation in this activity.
10. For immediate dissemination and compliance of all concerned.

WENDEL E. AVISADO

Acting Secretary General





7th NATIONAL SCOUT VENTURE CAMP
BSP Scout Camp Danao, Malapuc Norte, Maasin City
25-30 September 2016
Theme: "Growth and Stability"

APPLICATION FORM

Please complete all parts of the application form in block letters

Name of Local Council _____ **Region** _____

PERSONAL DETAILS

Surname _____ **First name** _____ **Middle Initial** _____

Gender _____ **Date of Birth** ____/____/____ (dd/mm/yy) **Place of Birth** _____

Height _____ **Weight** _____ **Blood type** _____ **Nationality** _____ **Religion** _____

Father's Name _____ **Mother's Name** _____

School or profession _____ **Grade or level of education** _____

Home Address _____ **City/Province** _____ **Zip** _____

Tel No. _____ **Mobile No.** _____ **Fax No.** _____ **E-mail** _____

Special Skills/Qualifications: _____

I transmit herewith: ☐ P 500.00 as Full Payment of my Registration Fee (Scout/Adult Leader)

Applicant's Signature _____

Date ____/____/____ (dd/mm/yy)

PARENT'S/GUARDIAN CONSENT

(for application of minor age)

We hereby approve this application and certify to its correctness. In consideration of the benefits to be derived, we expressly waive any and all claims against the Boy Scouts of the Philippines or its representatives on account of any incident or injury or damage to personal property that may occur beyond the control of the Contingent Officials/BSP provided adequate safety measures and precautions have been instituted in participation in the 7th National Scout Venture Camp.

Signature over Printed Name of Parent/Guardian

Date: _____

LOCAL COUNCIL ENDORSEMENT:

Name of Local Council: _____

Name of Person Authorizing this Application: _____ **Position** _____

Signature of Person Authorizing this Application: _____ **Date** ____/____/____

HEALTH DETAILS

Name: _____ **Local Council:** _____

Special Health Problem (Do you have any illness of the following?)

☐ Heart disease ☐ Hay fever ☐ Diabetic ☐ Hypertension ☐ Fainting

☐ Haemophilia ☐ Asthma ☐ Epileptic ☐ Sleep Walking ☐ Autism

Any other Allergies _____

Any physical disability _____

Others (please specify) _____

Recommendation and/or restrictions (if none, so state): _____

Physician (Signature over Printed Name): _____ **License No.:** _____

7th NATIONAL SCOUT VENTURE CAMP
BSP Camp Danao, Malapuc Norte, Maasin City
25 - 30 September 2016
Theme: "Growth and Stability"

OUTFIT ROSTER OF PARTICIPANTS

Sponsoring Institution: _____
Local Council: _____ Region: _____

POSITION	COMPLETE NAME (please write in PRINT)	AGE	GENDER	Current Rank	Position in the Unit
Adult Leader:					
Senior Scout					
Senior Scout					
Senior Scout					
Senior Scout					
Senior Scout					
Senior Scout					
Senior Scout					
Senior Scout					

POSITION	COMPLETE NAME (please write in PRINT)	AGE	GENDER	Current Rank	Position in the Unit
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Senior Scout					
Senior Scout					
Senior Scout					
Senior Scout					
Senior Scout					
Senior Scout					
Senior Scout					
Senior Scout					

Prepared and Submitted by: _____ Date: _____

Unit Scouting Coordinator

Verified and Checked:

Institutional Head/Representative

Date: _____

Council Scout Executive/OIC

Scout Venture Registration Status:

Delegation/Contingent Head

Full Payment: _____ OR NO: _____ Date: _____

Sub-Camp Assignment: _____

Sub-Camp Director: _____