



Boy Scouts of the Philippines

National Office

181 Natividad Almeda-Lopez St., Ermita, 1000 Manila

PO Box 1378, Manila CPO, Philippines

E-mail: bsp@scouts.org.ph

Website : www.scouts.org.ph

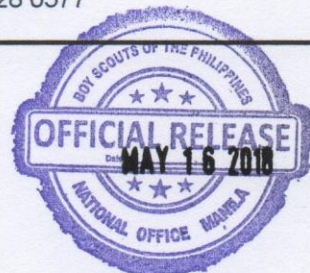
Tels. (632) 528 0555 * 527 8317 to 19 * Telefax: (632) 528 0577

MAY 16 2018

NATIONAL OFFICE MEMORANDUM

No. 27

Series of 2018



TO : REGIONAL SCOUT DIRECTORS, COUNCIL SCOUT
EXECUTIVES AND OFFICERS-IN-CHARGE

SUBJECT : 100th Years of Rover Scouting (13th National Rover Moot for
Luzon, Visayas and Mindanao)

1. The Boy Scouts of the Philippines is pleased to announce the holding of the 100th Years of Rover Scouting (13th NATIONAL ROVER MOOT for Luzon, Visayas and Mindanao on 26 – 31 August 2018 with the theme, "Commitment to Excellence") with the following venue.

LUZON: 13th NATIONAL ROVER MOOT
Camp Kainomayan, Brgy. San Juan
Botolan, Zambales

VISAYAS: 13th NATIONAL ROVER MOOT
Capitol Hills Scout Camp
Cebu City

MINDANAO: 13th NATIONAL ROVER MOOT
Pasonanca Park
Zamboanga City

2. **Aim and Objectives.** At the end of the 100 years of Rover Scouting (13th National Rover Moot), aims to provide safe, exciting, challenging and meaningful learning opportunities and educational activities geared towards responsible leadership, community development, environment and natural resources protection and preservation and build lasting friendship among brotherhood of open-air and service.

At the end of 13th National Rover Moot, the participants should be able to:

1. Participate and contribute in the development of local communities through the immersion program, activities and service projects such as artificial bee hive making, mural painting, canal cleaning/dredging, construction of public toilets, construction of nipa huts, tree/mangrove planting, outdoor trail design, painting of school building, etc.;
2. Develop awareness about the Environment, Development and Peace Education anchored on the UN Sustainable Development Goals through Cooperative learning, teamwork and youth involvement in the WOSM Better World Programmes - the Messengers of Peace (MoP) Initiatives; World Scout Environmental Programme (WSEP) and the Scouts of the World Award (SWA);
3. Undertake camp craft and woodcraft skills for self-reliance; outdoor exploration and high adventure activities that will promote active and healthy lifestyle among rover;
4. Acquire knowledge and skills about the relevant issues and challenges of today's society such as health, education, peace, environment, livelihood, family and human rights forum and dialogue;
5. Develop core life skills and 21st century leadership capabilities through team building, cooperative learning, group dynamics, creative problem-solving and decision-making skills; and

6. Strengthen camaraderie and fellowship among the Rovers from different councils nationwide.
3. **Qualifications for Participation.** The following are the minimum qualifications for participating Rovers, Rover Leaders and NSTs, viz:
 - a. **Rover Scouts** is expected to have leadership skills and potentials and enough camping experience;
 - i. Must be currently registered with a Rover Circle in good standing.
 - ii. Must be at least sixteen (16) to twenty six 26 years old; and those are in the Junior and Senior High School in the Rover Scouting Section.
 - iii. Must have a Health and Medical Certificate to be Physically Fit as certified by a Licensed Physician.
 - iv. Must have Parent's Permit for participants below 18 years old.
 - v. Must have a complete set of Camping Gears and Equipment.
 - b. **Rover Leaders** must have undergone the Basic Training and/or preferably with Advanced Training Course for Unit Leaders and understanding of his/her duties and responsibilities of Adult Leader;
 - i. Must be currently registered with a Rover Circle ii. Must be physically fit as certified by a physician.
 - iii. Must be of good moral character.
 - iv. Must be equipped with camping gears.
 - v. Preferably a Bead Holder or graduates of Advanced Training Courses (ATC) for Unit Leaders or Leaders of Adults.
 - c. **National Service Team.** Each Scouting Region is allocated with specific quota for Adult Leaders and volunteers who wish to serve as part of the National Service Team.
 - i. Must be currently registered as a Rover Scout or as an Adult Leader aged between eighteen (18) to fifty (50) years old.
 - ii. Must be physically fit as certified by a physician.
 - iii. Must be of good moral character.
 - iv. Must be at least a Wood Badge Holder with at least one (1) year of experience and service.
 - v. Must be duly recommended by the Council Scout Executive/Officer-in-Charge and the Regional Scout Director.
4. **Quota for Participation.** The participation to the Rover Moot will come from the one hundred twenty (120) Local Councils and ten (10) Scouting Regions of the BSP and is pro-rated as follows:

LUZON	: 500 Rovers and Rover Leaders
VISAYAS	: 500 Rovers and Rover Leaders
MINDANAO	: 500 Rovers and Rover Leaders

 - a. **Rovers.** A Standard Ratio of One (1) Leader for every nine (9) Rovers must be observed in the composition of Moot Contingents.
 - b. **NSTs.** Each Scouting Region is allocated with specific quota for Adult Leaders and volunteers who wish to serve as part of the National Service Team. NSTs played a significant role in the implementation of the Rover Moot program as well as in the Administration Support to the Moot Organizers. The NST allocation per Scouting Region is pegged at 10% of the allocated number of Rover Participants, respectively.
5. **Registration Fee.** A Registration fee of **Five Hundred Pesos Only (P 500.00)** shall be charged each participant to cover expenses for program materials, certificates, individual souvenir items and other administrative costs during the event.

6. Remittance of Payment: Inclusive Dates: 15 June to 16 July 2018.

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 Rover Moot account.

Registration Fees must be paid directly to the host councils via bank transfer, to the official Rover Moot account, with the following details:

For LUZON Participants

Account Name: **Ramon Magsaysay Council BSP**
Savings Account Number: **1121-0908-28**
Bank Name: **LAND BANK OF THE PHILIPPINES**
Branch: **Iba Branch**

For VISAYAS Participants

Account Name: **Boy Scouts of the Philippines Cebu Council**
Savings Account Number: **9051-0003-39**
Bank Name: **BANK OF THE PHILIPPINE ISLAND**
Branch: **N. Bacalso Branch, Cebu City**

For MINDANAO Participants

Account Name: **Boy Scouts of the Philippines Zamboanga City Council**
Savings Account Number: **003178005411**
Bank Name: **BANCO DE ORO**
Branch: **Zamboanga City Branch**

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, with a copy furnished to email of the host council.

THERE WILL BE NO ON SITE REGISTRATION AS REGISTRATION WILL CLOSE TWO (1) MONTH BEFORE THE ROVER MOOT. ONLY THE HOST COUNCILS, BSP, IS AUTHORIZED TO COLLECT AND/OR RECEIVE THE ROVER MOOT REGISTRATION FEE.

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

7. **Rover Circle Equipment:** The standard Circle equipment is prescribed in activities of this nature. It is suggested that only handy equipment (tent, cooking gears, sleeping bags, food provisions, uniform, costumes, extra clothes, personal toilet kit. etc.) should be brought by every contingent.
8. **Food Provisions.** The Moot participants of each Local Council must provide for their own food and other basic requirements that will be sufficient throughout the entire duration of the Rover Moot. Each contingent is responsible in managing their respective kitchens, mess and commissaries. Wet and Dry Markets will be made available at the Camp Site in order to ensure the availability of food supplies at reasonable prices.
9. **Travel Itinerary.** All Local Council Moot participants are advised to submit their Itinerary of Travel to their respective Regional Scout Directors for record and reference purposes. Furthermore, all PARTICIPANTS are advised to report at the Rover Moot Site not later than 0900H of 26 August 2018, Sunday and will only be cleared to leave the camp after the Grand Closing Ceremony.
10. **Moot Bulletins.** The National Project Management Team will be publishing and releasing Rover Moot Bulletins from time to time in order to provide everyone with the latest information and details about the 13th National Rover Moot, allowing and enabling all participants to adequately prepare for the event.

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

Official Website www.scouts.org.ph/13thNRoverMoot (sample)

Official Email bsp@scouts.org.ph

Official Facebook Fan Page 13th National Rover Moot (facebook.com/sample)

Official Twitter Account @ScoutsPH (twitter.com/ScoutsPH)

11. 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.
12. Should you have any question/s and/or query/ies, you may refer them to the National Project Management Team of the **13th NATIONAL ROVER MOOT** thru the any of following persons:

For LUZON

IMELDA S. SAMSON

Regional Scout Director
Northern Luzon Region, BSP
Project Officer, 13th National Rover Moot
imeesamsom1967@gmail.com

JORUEL L. ADLAO

Officer-In-Charge
Ramon Magsaysay Council, BSP
Project Coordinator
bspzambales1947@gmail.com

For VISAYAS

BIENVENIDO B. TOLEDO

Regional Scout Director
Visayas Region, BSP
Project Officer, 13th National Rover Moot
bien.toledo@yahoo.com

REY B. LANETE

Officer-In-Charge
Cebu Council, BSP
Project Coordinator
cebu.bsp@scouts.org.ph

For MINDANAO

ARNEL C. DELUTE

Regional Field Scout Executive
Mindanao Region, BSP
Project Officer, 13th National Rover Moot
arneldelute05@gmail.com

JOSELITO I. ALEJABO

Council Scout Executive
Zamboanga City Council, BSP
Project Coordinator
bspzamboangacitycouncil@gmail.com

For NATIONAL OFFICE, BSP

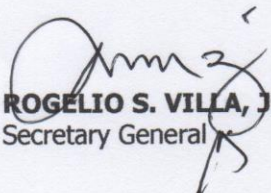
SOFRONIO D. HONTANOSAS

Acting Director, Field Operations Division
National Project Management Team
ron.hontanosas@gmail.com

CHARLIE M. CAMEROS

MIS Executive
Project Coordinator
charlie.cameros@scouts.org.ph

13. For information, guidance, compliance and widest dissemination of all concerned.


ROGELIO S. VILLA, JR.
Secretary General



13th NATIONAL ROVER MOOT – LUZON

Camp Kainomayan, Brgy. San Juan, Botolan, Zambales

26 – 31 August 2018

APPLICATION FORM for PARTICIPANTS

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)

CONTACT PERSON IN CASE OF EMERGENCY

Name: _____

Relationship: _____

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

Comment/Request: _____

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?)

- | | | | | |
|--|------------------------------------|------------------------------------|--|-----------------------------------|
| <input type="checkbox"/> Heart disease | <input type="checkbox"/> Hay fever | <input type="checkbox"/> Diabetic | <input type="checkbox"/> Hypertension | <input type="checkbox"/> Fainting |
| <input type="checkbox"/> Haemophilia | <input type="checkbox"/> Asthma | <input type="checkbox"/> Epileptic | <input type="checkbox"/> Sleep Walking | <input type="checkbox"/> 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.: _____

13TH NATIONAL ROVER MOOT - LUZON
Camp Kainomayan, Brgy. San Juan, Botolan, Zambales
26 – 31 August 2018
Theme: "Commitment to Excellence"

ROSTER OF PARTICIPANTS

Sponsoring Institution: _____
Local Council: _____ **Region:** _____

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

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

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

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

Prepared and Submitted by: _____ Date: _____

Unit Scouting Coordinator

Institutional Head/Representative

Verified and Checked: _____ Date: _____

Council Scout Executive/OIC

Delegation/Contingent Head

Rover Moot Registration Status:
Full Payment: _____ **OR NO:** _____ **Date:** _____

Sub-Camp Assignment: _____ Sub-Camp Director: _____



13th NATIONAL ROVER MOOT – LUZON
Camp Kainomayan, Brgy. San Juan, Botolan, Zambales
26 – 31 August 2018

APPLICATION FORM FOR THE NATIONAL SERVICE TEAM
Please complete all parts of the application form in block letters

Position in Scouting _____

Surname _____ First name _____ Middle Initial _____

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

Level of Education _____ Nationality _____ Religion _____

Home Address _____ City/Province _____ Country _____ Zip _____

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

Height _____ (cm) Weight _____ (kg) Blood Type _____

Language Skills: (Please indicate a fluency level)

1. _____ Specify _____

2. _____ Specify _____

3. _____ Specify _____

Special Foods (Do you have any special requirements for medical , religious or other reasons?)

Special foods required: _____

Food you must not eat (Please specify): _____

Due to (allergy, special diet, etc): _____

Scouting History (please complete):

Present Position within the Scout Organization: _____

Participation in NATIONAL events as: _____

Please give us more information about your knowledge, experiences:

<input type="checkbox"/> Peace Education	<input type="checkbox"/> Handicrafts	<input type="checkbox"/> Pioneering	<input type="checkbox"/> Computer	<input type="checkbox"/> Warehouses/Stockroom
<input type="checkbox"/> Administration	<input type="checkbox"/> Photography	<input type="checkbox"/> Lifeguard	<input type="checkbox"/> Human Right	<input type="checkbox"/> Canoeing/Rowing
<input type="checkbox"/> Orienteering	<input type="checkbox"/> Snorkelling	<input type="checkbox"/> Rappelling	<input type="checkbox"/> Run Group Activities	<input type="checkbox"/> Religious Activities
<input type="checkbox"/> Public Relation	<input type="checkbox"/> Journalism	<input type="checkbox"/> Radio Operator	<input type="checkbox"/> Outdoor Activities	<input type="checkbox"/> Crowd Management
<input type="checkbox"/> Performing Arts	<input type="checkbox"/> First Aid	<input type="checkbox"/> Hiking	<input type="checkbox"/> Music (Play Instrument)	<input type="checkbox"/> Biking
<input type="checkbox"/> Health Education	<input type="checkbox"/> Environment	<input type="checkbox"/> Nature Study	<input type="checkbox"/> Exhibition Operating	<input type="checkbox"/> Security
<input type="checkbox"/> Rock Climbing	<input type="checkbox"/> Swimming	<input type="checkbox"/> Robotic		

Skill/Qualifications: _____

I transmit herewith: ☐ P 500.00 as full payment of my Registration Fee

Applicant’s Signature _____ **Date** / / (dd/mm/yy)

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?)

<input type="checkbox"/> Heart disease	<input type="checkbox"/> Hay fever	<input type="checkbox"/> Diabetic	<input type="checkbox"/> Hypertension	<input type="checkbox"/> Fainting
<input type="checkbox"/> Haemophilia	<input type="checkbox"/> Asthma	<input type="checkbox"/> Epileptic	<input type="checkbox"/> Sleep Walking	<input type="checkbox"/> 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.:** _____



13th NATIONAL ROVER MOOT – VISAYAS

Capitol Hills, Scout Camp, Cebu City

26 – 31 August 2018

APPLICATION FORM for PARTICIPANTS

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)

CONTACT PERSON IN CASE OF EMERGENCY

Name: _____

Relationship: _____

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

Comment/Request: _____

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?)

- | | | | | |
|--|------------------------------------|------------------------------------|--|-----------------------------------|
| <input type="checkbox"/> Heart disease | <input type="checkbox"/> Hay fever | <input type="checkbox"/> Diabetic | <input type="checkbox"/> Hypertension | <input type="checkbox"/> Fainting |
| <input type="checkbox"/> Haemophilia | <input type="checkbox"/> Asthma | <input type="checkbox"/> Epileptic | <input type="checkbox"/> Sleep Walking | <input type="checkbox"/> 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.: _____

13TH NATIONAL ROVER MOOT - VISAYAS

Capitol Hills Scout Camp, Cebu City
26 – 31 August 2018
Theme: "Commitment to Excellence"

ROSTER OF PARTICIPANTS

Sponsoring Institution: _____
Local Council: _____ Region: _____

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

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

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

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

Prepared and Submitted by: _____ Date: _____

Unit Scouting Coordinator

Verified and Checked:

Institutional Head/Representative

Date: _____

Council Scout Executive/OIC

Delegation/Contingent Head

Rover Moot Registration Status:
Full Payment: _____ OR NO: _____ Date: _____

Sub-Camp Assignment: _____ Sub-Camp Director: _____



13th NATIONAL ROVER MOOT – VISAYAS
Capitol Hills Scout Camp, Cebu City
26 – 31 August 2018

APPLICATION FORM FOR THE NATIONAL SERVICE TEAM
Please complete all parts of the application form in block letters

Position in Scouting _____

Surname _____ First name _____ Middle Initial _____

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

Level of Education _____ Nationality _____ Religion _____

Home Address _____ City/Province _____ Country _____ Zip _____

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

Height _____ (cm) Weight _____ (kg) Blood Type _____

Language Skills: (Please indicate a fluency level)

1. _____ Specify _____

2. _____ Specify _____

3. _____ Specify _____

Special Foods (Do you have any special requirements for medical , religious or other reasons?)

Special foods required: _____

Food you must not eat (Please specify): _____

Due to (allergy, special diet, etc): _____

Scouting History (please complete):

Present Position within the Scout Organization: _____

Participation in NATIONAL events as: _____

Please give us more information about your knowledge, experiences:

<input type="checkbox"/> Peace Education	<input type="checkbox"/> Handicrafts	<input type="checkbox"/> Pioneering	<input type="checkbox"/> Computer	<input type="checkbox"/> Warehouses/Stockroom
<input type="checkbox"/> Administration	<input type="checkbox"/> Photography	<input type="checkbox"/> Lifeguard	<input type="checkbox"/> Human Right	<input type="checkbox"/> Canoeing/Rowing
<input type="checkbox"/> Orienteering	<input type="checkbox"/> Snorkelling	<input type="checkbox"/> Rappelling	<input type="checkbox"/> Run Group Activities	<input type="checkbox"/> Religious Activities
<input type="checkbox"/> Public Relation	<input type="checkbox"/> Journalism	<input type="checkbox"/> Radio Operator	<input type="checkbox"/> Outdoor Activities	<input type="checkbox"/> Crowd Management
<input type="checkbox"/> Performing Arts	<input type="checkbox"/> First Aid	<input type="checkbox"/> Hiking	<input type="checkbox"/> Music (Play Instrument)	<input type="checkbox"/> Biking
<input type="checkbox"/> Health Education	<input type="checkbox"/> Environment	<input type="checkbox"/> Nature Study	<input type="checkbox"/> Exhibition Operating	<input type="checkbox"/> Security
<input type="checkbox"/> Rock Climbing	<input type="checkbox"/> Swimming	<input type="checkbox"/> Robotic		

Skill/Qualifications: _____

I transmit herewith: ☐ P 500.00 as full payment of my Registration Fee

Applicant’s Signature _____ **Date** / / (dd/mm/yy)

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?)

<input type="checkbox"/> Heart disease	<input type="checkbox"/> Hay fever	<input type="checkbox"/> Diabetic	<input type="checkbox"/> Hypertension	<input type="checkbox"/> Fainting
<input type="checkbox"/> Haemophilia	<input type="checkbox"/> Asthma	<input type="checkbox"/> Epileptic	<input type="checkbox"/> Sleep Walking	<input type="checkbox"/> 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.:** _____



13th NATIONAL ROVER MOOT – MINDANAO

Pasonanca Park, Zamboanga City

26 – 31 August 2018

APPLICATION FORM for PARTICIPANTS

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)

CONTACT PERSON IN CASE OF EMERGENCY

Name: _____

Relationship: _____

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

Comment/Request: _____

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?)

- | | | | | |
|--|------------------------------------|------------------------------------|--|-----------------------------------|
| <input type="checkbox"/> Heart disease | <input type="checkbox"/> Hay fever | <input type="checkbox"/> Diabetic | <input type="checkbox"/> Hypertension | <input type="checkbox"/> Fainting |
| <input type="checkbox"/> Haemophilia | <input type="checkbox"/> Asthma | <input type="checkbox"/> Epileptic | <input type="checkbox"/> Sleep Walking | <input type="checkbox"/> 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.: _____

13TH NATIONAL ROVER MOOT - MINDANAO

Pasonanca Park, Zamboanga City
26 – 31 August 2018
Theme: "Commitment to Excellence"

ROSTER OF PARTICIPANTS

Sponsoring Institution: _____
Local Council: _____ Region: _____

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

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

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

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

Prepared and Submitted by: _____ Date: _____

Unit Scouting Coordinator

Verified and Checked: _____

Institutional Head/Representative

Date: _____

Council Scout Executive/OIC

Delegation/Contingent Head

Rover Moot Registration Status:
Full Payment: _____ **OR NO:** _____ **Date:** _____

Sub-Camp Assignment: _____ Sub-Camp Director: _____



13th NATIONAL ROVER MOOT – MINDANAO
Pasonanca Park, Zamboanga City
26 – 31 August 2018

APPLICATION FORM FOR THE NATIONAL SERVICE TEAM
Please complete all parts of the application form in block letters

Position in Scouting _____

Surname _____ First name _____ Middle Initial _____

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

Level of Education _____ Nationality _____ Religion _____

Home Address _____ City/Province _____ Country _____ Zip _____

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

Height _____ (cm) Weight _____ (kg) Blood Type _____

Language Skills: (Please indicate a fluency level)

1. _____ Specify _____

2. _____ Specify _____

3. _____ Specify _____

Special Foods (Do you have any special requirements for medical , religious or other reasons?)

Special foods required: _____

Food you must not eat (Please specify): _____

Due to (allergy, special diet, etc): _____

Scouting History (please complete):

Present Position within the Scout Organization: _____

Participation in NATIONAL events as: _____

Please give us more information about your knowledge, experiences:

<input type="checkbox"/> Peace Education	<input type="checkbox"/> Handicrafts	<input type="checkbox"/> Pioneering	<input type="checkbox"/> Computer	<input type="checkbox"/> Warehouses/Stockroom
<input type="checkbox"/> Administration	<input type="checkbox"/> Photography	<input type="checkbox"/> Lifeguard	<input type="checkbox"/> Human Right	<input type="checkbox"/> Canoeing/Rowing
<input type="checkbox"/> Orienteering	<input type="checkbox"/> Snorkelling	<input type="checkbox"/> Rappelling	<input type="checkbox"/> Run Group Activities	<input type="checkbox"/> Religious Activities
<input type="checkbox"/> Public Relation	<input type="checkbox"/> Journalism	<input type="checkbox"/> Radio Operator	<input type="checkbox"/> Outdoor Activities	<input type="checkbox"/> Crowd Management
<input type="checkbox"/> Performing Arts	<input type="checkbox"/> First Aid	<input type="checkbox"/> Hiking	<input type="checkbox"/> Music (Play Instrument)	<input type="checkbox"/> Biking
<input type="checkbox"/> Health Education	<input type="checkbox"/> Environment	<input type="checkbox"/> Nature Study	<input type="checkbox"/> Exhibition Operating	<input type="checkbox"/> Security
<input type="checkbox"/> Rock Climbing	<input type="checkbox"/> Swimming	<input type="checkbox"/> Robotic		

Skill/Qualifications: _____

I transmit herewith: ☐ P 500.00 as full payment of my Registration Fee

Applicant’s Signature _____ **Date** / / (dd/mm/yy)

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?)

<input type="checkbox"/> Heart disease	<input type="checkbox"/> Hay fever	<input type="checkbox"/> Diabetic	<input type="checkbox"/> Hypertension	<input type="checkbox"/> Fainting
<input type="checkbox"/> Haemophilia	<input type="checkbox"/> Asthma	<input type="checkbox"/> Epileptic	<input type="checkbox"/> Sleep Walking	<input type="checkbox"/> 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.:** _____
