



## CAMPER PACK / SCOUT CAMP 2021 / POLAND

PLEASE COMPLETE ALL THESE FORMS FOR EACH CHILD AND RETURN TO US BY POST 7 DAYS AFTER YOUR FIRST PAYMENT IS COMPLETED AND YOUR INVOICE RECEIVED. IF ANY INFORMATION CHANGES AFTER COMPLETION AND PRIOR TO DEPARTURE PLEASE NOTIFY US IMMEDIATELY. WE ARE UNABLE TO ACCEPT YOUR CHILD TO CAMP WITHOUT THESE FORMS.

### CHILD'S DETAILS:

Child's family name (surname): \_\_\_\_\_ Child's first name(s): \_\_\_\_\_

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Camp: Scout Camp in Poland – **Coach** / 26.07.2021 – 07.08.2021

Nationality: \_\_\_\_\_

Passport details: \_\_\_\_\_

Permanent address: \_\_\_\_\_ Same as Parent/Guardian/Carer

### PARENT/GUARDIAN/CARER DETAILS:

Title: \_\_\_\_\_ First name: \_\_\_\_\_ Family name (surname): \_\_\_\_\_

Mobile: \_\_\_\_\_ Work tel: \_\_\_\_\_ Home tel: \_\_\_\_\_ E-mail: \_\_\_\_\_

Permanent address: \_\_\_\_\_ Post code: \_\_\_\_\_

Your location and contact number during your child's holiday (if different from above) \_\_\_\_\_

\_\_\_\_\_ Contact tel/mobile: \_\_\_\_\_

Please state your relationship with the child e.g. Parent/Guardian/Carer \_\_\_\_\_

If in foster care please, advise name and contact details of child's social worker \_\_\_\_\_

### MEDICAL DETAILS:

Name and telephone no. of child's registered medical practitioners/doctor: \_\_\_\_\_

Does your child have any allergies? Yes No

If yes, please give details: \_\_\_\_\_

Please check the boxes for any of the illnesses/disabilities that your child suffers from and give details in space provided below:

Skin problems      Back/joint problems      Chest pains      Headaches      Diabetes      Asthma

Dizzy spells/regular fainting      Seizures      Visual impairment      Other (please state)

Details: \_\_\_\_\_

\_\_\_\_\_

**MEDICAL DETAILS:**

Immunisations (year): Tetanus \_\_\_\_\_, Diphtheria \_\_\_\_\_, Typhoid \_\_\_\_\_, Small Pox \_\_\_\_\_, other: \_\_\_\_\_

Past Medical History: Diphtheria \_\_\_\_\_, Hepatitis \_\_\_\_\_, Typhoid \_\_\_\_\_, other: \_\_\_\_\_

Has your child been exposed to any communicable disease within last three weeks? If yes, please state which disease and when exposed: \_\_\_\_\_

Has your child had any recent operations or injuries? If yes, please give details and advise of any support they may need from us: \_\_\_\_\_

Will your child require medication whilst at camp?                      Yes                      No

If yes, please detail below:

Medication name	Dose	How is it administered?	When must it be taken?

All medications must be handed to Olimp Tour staff upon arrival and will be issued by our onsite welfare teams at appropriate times.

Medication should be clearly labelled with campers name and date of birth. If your child is bringing an inhaler or epi pen with them they will be encouraged to carry it with them at all times. Please note that our staff are unable to administer injections.

How is your child during coach travel? If your child have motion sickness, please make sure to pack medication into hand luggage.

Does your child wears?    Braces                      Glasses

Other details: \_\_\_\_\_

Parent/Guardian/Carer: \_\_\_\_\_ Signature: \_\_\_\_\_

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

## THESE DETAILS MUST BE COMPLETED AND RETURNED BEFORE YOUR CHILD CAN BE ACCEPTED AT CAMP

Our Code of Behaviour is based upon mutual respect and tolerance. Olimp Tour is about safely having fun, making friends and trying new and positive experiences. We insist that our code is followed at all times. As an organisation we are also committed to and support anti-bullying campaigns and will not tolerate anti-social practices whenever and wherever they occur. We therefore insist that if any parent/guardian has concerns or is aware of a history of a child being unable to comply with points raised within our Code then we should be contacted immediately. We will carefully consider matters and advice on whether we feel the camp is an appropriate holiday choice with particular references to such considerations as access, successful participation and health and safety. Please remember that we always reserve the right under our terms and conditions of booking, to exclude any child after holiday commencement, if their behaviour is incompatible with the general enjoyment and well-being of others.

- Olimp Tour will not tolerate bullying of any nature at our camps.
- For the safety and well-being of all guests at camp, we reserve the right to invoke Clause IV.4-5 of our Booking Conditions should any guest refuse to adhere to this Code of Behaviour. "We reserve the right to decline to accept or cancel any Booking or exclude any Child at any time prior to or during the Holiday if in our reasonable opinion the behaviour of that Child is disruptive, dangerous, annoying, or incompatible with the general enjoyment of other visitors".
- Campers can bring mobile phones with them, which will be looked after for safekeeping in security boxes in their teacher room and given to the children to receive calls from home during specific times

### **Behaviour deemed inappropriate includes, but is not limited to:**

1. Leaving the site unless accompanied or agreed by a member of Olimp Tour staff.
2. Threatening behaviour, foul, offensive or insulting language to other guests or Olimp Tour staff.
3. Consumption of alcohol.
4. Suspected involvement with illegal drugs.
5. Smoking by any camper.
6. Entering accommodation used by the opposite sex or fostering an inappropriate relationship with another camper.
7. Wilfully leaving allocated accommodation blocks, without good reason, after lights out.
8. Theft, vandalism or illegal activities.
9. Inappropriate behaviour.
10. Bullying (in any form).
11. Accessing and/or publishing inappropriate or offensive content on the internet/social media.

**In the event of a drastic breach of the camp regulations, the Olimp Tour office reserves the right to inform about of the situation the child's educational institution.**

**Please discuss these important points with your child and sign where indicated below. Our Code of Behaviour helps ensure that your child has a safe, happy and memorable holiday with Olimp Tour.**

Parent/Guardian/Carer: \_\_\_\_\_ Signature: \_\_\_\_\_

Child's name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ School email address: \_\_\_\_\_



3/3



### Child Consent for International Travel

I \_\_\_\_\_ (Your Name and Surname) declare that I am the lawful (Parent / Guardian) of \_\_\_\_\_ (Child Name) (male / female) born on \_\_\_\_ / \_\_\_\_ / \_\_\_\_ at \_\_\_\_\_ (Country of birth). \_\_\_\_\_ (Child Name) has a \_\_\_\_\_ (Nationality) (passport) numbered \_\_\_\_\_ (Serial Number), date of issue \_\_\_\_\_, date of expiry \_\_\_\_\_, issued at \_\_\_\_\_ (Country of issue).

My child, \_\_\_\_\_ (Child Name) has my consent to travel with Olimp Tour Ltd (registered with Companies House no. 09197511) residing at: 155 Broad Lane, N15 4QT, London, United Kingdom.

Tour will take a place to: Poland, Czernica 26.07.2021 - 07.08.2021

In the event that my child requires emergency medical treatment and I cannot be reached, Olimp Tour is authorised to consent to medical treatment in my stead. Any questions and concerns regarding this document may be addressed to me at:

**Parent details:**

Name and Surname: \_\_\_\_\_

Address: \_\_\_\_\_

Mobile phone: \_\_\_\_\_

Home phone: \_\_\_\_\_

Olimp Tour checked necessary documents of parents and consider above information's in accordance with the truth.

Name of Parent/Guardian (in block capitals): \_\_\_\_\_ Signature: \_\_\_\_\_

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

Signed by Olimp Tour: Katarzyna Siewnik

Date: 11.12.2019



**IN THE CASE OF QUERIES ON THE DAY OF TRAVEL PLEASE CONTACT OLIMP TOUR ON +44(0)203 695 0983**