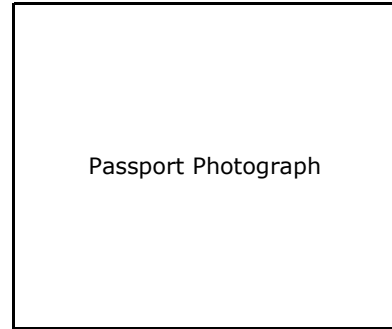


PLEASE **PRINT** CLEARLY IN LEGIBLE BLOCK CAPITALS!

Personal Details of Adult Leader


Title : _____

Surname : _____

Full Name/s : _____

Preferred Name : _____

Daytime Tel. No : _____

Cellphone No : _____

Email Address : _____

Residential Address : _____

Postal Address : _____

Postal Code : _____

Date of Birth : _____ (dd/mm/yy) Age as at 26 December 2010: _____ (yy/mm)

Place of Birth : _____ Country of Birth : _____

Citizenship : _____ Home Language : _____

 Proficiency in English :

Poor	Average	Good	Excellent
------	---------	------	-----------

 Gender :

Male	Female
------	--------

Religion : _____

Occupation : _____

Interests / Hobbies : _____

Note : The above address details will be used for all correspondence
As most communication will be per email it is requested that an email address is provided!
Sponsor / Person Responsible for Payment

Surname : _____

Relationship to Applicant : _____

Full Name/s : _____

Daytime Contact No's : Tel.No : _____ Cell No : _____ Fax No : _____

Email Address : _____

Postal Address : _____

Postal Code : _____



Scouting Details

Scout Group : _____ District : _____

Province : _____ Membership No : _____

Position Held : _____ Warrant Number : _____

Service (in Years) :

Cub / Brownie :	Scout / Guide :	Rover :
-----------------	-----------------	---------

Adult Service (in Years) :

Lay :	Scouter / Guider :
-------	--------------------

Wood Badge :

Cub	Scout	Rover	GS / Comm
-----	-------	-------	-----------

 * indicate with an X

Date Completed : _____

Indicate the training courses attended as well as the branch with an X and include the date attended in the blank block.

Training Courses Attended :	Permit		Warrant		Wood Badge		Cub	Scout	GS/Comm
Specialist Courses Attended :	Air Charge		First Aid		Mentoring Course		Tutor Course		
	Mountain Awareness		Mountain Leadership		Water Awareness		Water Charge		

Other Training Courses Attended : _____

Awards Received : _____

National/International Events Attended : _____
(Include date)

Medical Information

Name of Medical Aid : _____ Medical Aid No : _____

Dietary Requirements :

Halaal	Kosher	Vegetarian	Vegan	Other :
--------	--------	------------	-------	---------

State any important illnesses that you have suffered / currently suffer (e.g. Asthma, Epilepsy, Diabetes, Allergies) :

State any allergies that you may have :

Do you require any chronic or permanent medication?

Yes	No
-----	----

If 'Yes', please supply details : _____

Next of Kin & Emergency Contacts

Next of Kin - Name : _____ Tel No : _____ Cell No : _____
Relationship to you : _____ Email : _____

Names of two persons, other than the next of kin, to be contacted in the event of an emergency.

2nd Contact - Name : _____ Tel No : _____ Cell No : _____
Relationship to you : _____ Email : _____

3rd Contact - Name : _____ Tel No : _____ Cell No : _____
Relationship to you : _____ Email : _____

Passport Information

Do you hold a valid passport? :

Yes	No
-----	----

 If 'No' Have you applied for a passport?

Yes	No
-----	----

Date passport applied for? _____

Country of Issue : _____ Passport Number : _____

Date of Issue : _____ Date of Expiry : _____

**All Contingent Members must be in possession of a valid passport by 1 October 2010.
Passport must be valid for a minimum of 6 months after the date of the Centenary Jamboree.**

Closing Date for Applications

PLEASE NOTE THE CLOSING DATE FOR ALL APPLICATIONS IS 31 July 2010

This application must be accompanied by a save-a-place deposit of R1,000 in order to secure a place as a member of the South African Contingent to the Hong Kong Scout Centenary Jamboree to be held in Hong Kong from 27th December to 1st January 2011.

The balance of the payment (Centenary Jamboree) must be paid by 30 November 2010

This payment will serve as the first payment of the full Jamboree fee and is to be deposited into the following bank account : Please use Hong Kong Jamboree + Scouts Name as reference

**Bank : Nedbank
Branch : Foreshore Cape Town
Account Number : 1083278509
Account Name : National Scout Council**

The application forms together with a copy of the deposit slip must be sent to :

**Chief Scout's Commissioner
South African Scout Association,
PO Box 2434, Clareinch, 7740.**

PLEASE **PRINT** CLEARLY IN LEGIBLE BLOCK CAPITALS!**Recommendation by the Group Scouter, DC / PC & SAHQ**

Applicants Name : _____ Scout Group : _____

Group Scouter's Name : _____ GS's Telephone No : _____

Comment / Recommendation : _____

_____-----
GS's Signature

Date : _____

Dist/Prov Commissioner's Name : _____ Telephone No : _____

Comment / Recommendation : _____

_____-----
DC's/PC's Signature

Date : _____

SAHQ ENDORSEMENT

Chief Scout's Commissioner _____ CSC Tel. No : _____

Comment / Recommendation : _____

_____-----
Chief Scout's Commissioner

Date : _____

For SASA Office Use

Comment / Recommendation : _____

Application Checklist

Use this checklist to ensure that all items and documents required for the application have been submitted.

	Checked by Applicant	Checked by SAHQ
Hong Kong Centenary Jamboree Application Form - completed in FULL	<input type="checkbox"/>	<input type="checkbox"/>
Passport photograph attached to Application Form	<input type="checkbox"/>	<input type="checkbox"/>
Photocopy of front page of current valid passport	<input type="checkbox"/>	<input type="checkbox"/>
Applicants personal motivation (additional pages)	<input type="checkbox"/>	<input type="checkbox"/>
Recommendation by District Commissioner	<input type="checkbox"/>	<input type="checkbox"/>
Applicant's Undertaking & Code of Conduct - completed and signed by applicant	<input type="checkbox"/>	<input type="checkbox"/>
Parent/Guardian Consent Form - completed and signed by parent/guardian (if applicant under 21)	<input type="checkbox"/>	<input type="checkbox"/>
Copy of deposit slip for R1000 Deposit	<input type="checkbox"/>	<input type="checkbox"/>