

Camp / Adventure-based Activity / Event Application Form (OUT.01) 2025



This Form must be completed by the Leader in Charge of the planned camp/activity or event.

The following forms must also be completed prior to this activity:

- Risk Assessment Plan for Outdoor Activities/ Events + Camps (ADM.56b)
- Activity Consent and Health Form for Youth Members (ADM.27) – completed by a parent/guardian.
- Adult Information for Activities Form (ADM.28) – completed by attending adults.

Once the camp/activity or event has taken place, the Leader in Charge submits the Camp/activity/event Report (OUT.03).

LEADER IN CHARGE DETAILS

First Name

Last Name

Membership Number

Mobile Phone Number

Girl Guide Email

Working With Children Check Number

Are your First Aid qualifications and CPR current?

Y N

Provide details of any Girl Guide Outdoors modules you have completed.

CAMP / ACTIVITY / EVENT DETAILS

Start Date

End Date

Camp / activity / event start time and end time e.g. Friday 6pm to Sunday 10am

Type of Camp / Activity / Event

- | | | |
|--|---|---|
| <input type="radio"/> Adventure-based activity | <input type="radio"/> Joint activity (other organisation) | <input type="radio"/> Outdoor camp (bush site) |
| <input type="radio"/> Assessment camp/activity | <input type="radio"/> Indoor camp | <input type="radio"/> Outdoor camp (established site) |
| <input type="radio"/> Expedition (controlled) | <input type="radio"/> Indoor overnight stay | <input type="radio"/> Patrol/Trefoil 3 camp |
| <input type="radio"/> Expedition (wilderness) | <input type="radio"/> Interstate camp | <input type="radio"/> Other |

NAME/ADDRESS AND LOCATION OF CAMP/ACTIVITY OR EVENT

Please attach map if location warrants this.

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PARTICIPANTS

Units / Districts / Regions or Peer Groups attending

If a joint activity, please give details of participating organisations

Organisation or Group/Number of participants/ Leader in Charge of the group

Is the other organisation Scouts? Yes No

Remember! Girl Guides must register through SGGO/National processes for all activities/events.

How many adults are attending?

How many Youth Members are attending?

Check supervision ratios - [Ratios at a Glance](#) on Guide Lines.

How many Youth Members 5-8 Yrs?

How many Youth Members 9-14 Yrs?

How many Youth Members 15-17 Yrs?

PLANNED ACTIVITIES

List each adventure-based activity and list details of all other PLANNED activities e.g. bushwalk / water activities

ADULTS (IN ADDITION TO LEADER IN CHARGE)

Add additional pages as required

Name	Role	Membership number
<input type="text"/>	<input type="text" value="First Aider"/>	<input type="text"/>

Name	Role	Membership number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Name	Role	Membership number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Name	Role	Membership number
<input type="text"/>	<input type="text"/>	<input type="text"/>

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<input type="text"/>	<input type="text"/>	<input type="text"/>

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WHEN DOES THIS FORM NEED TO BE COMPLETED?

This form is to be completed for all Girl Guide camps, adventure-based activities and events. This includes all joint activities with other organisations (e.g. Scouts), whether Unit based or when using a shared premises.

LEADER IN CHARGE CHECKLIST

As the Leader in Charge, I confirm that I have completed the following:

- I have read all the relevant information on [Guide Lines for Girl Guides and Girl Guide Volunteers](#).
- I have checked that the campsite/venue is a Girl Guide approved location.
- I have checked that instructor/s qualifications are current.
- I have notified my District/Region Manager of the details, and they support this application.
- I have checked local fire restrictions.
- I have visited/checked the camp/activity/event location and checked the facilities. (cooking, water, toilets, fire/gadget wood)
- I have considered transport to and from the camp/location and included this in my Risk Assessment Plan.
- I have attached the [Risk Assessment Plan Form \(ADM.56b\)](#) for this camp/activity/event.

SUBMITTING THIS FORM

Please submit this form to the relevant person 6 weeks before the planned activity or event.

Check your [State Girl Guide Organisation \(SGGO\)](#) website for more details on State specific policies and procedures.

I have lodged this Form with

Date of lodgement

 /

This camp/activity/event has been approved by

Date of approval

 /

Links to key information:

[Your SGGO website](#)

[Girl Guide Forms](#)

[Girl Guiding in Practise](#)

[Guiding Outdoors](#)

[Camping Rules and Requirements](#)

[Joint activities - Girl Guides Australia and Scouts Australia](#)