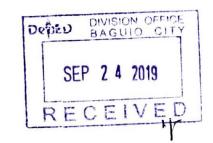


### GIRL SCOUTS OF THE PHILIPPINES

Northern Luzon Region Baguio City Council



CHQ Circular No. <u>34</u> Series 2019

TO : DISTRICT SUPERVISORS, PRINCIPALS, HEAD TEACHERS, GSP DISTRICT FIELD ADVISERS, GSP SCHOOL COORDINATORS AND TROOP LEADERS

RE : 6th FAMILY GETAWAY CAMP

DATE: 20 September 2019

We would like to inform you that he 6<sup>th</sup> Family Getaway Camp with the theme: "Bonding through the Arts" scheduled on October 5-6, 2019.

### **OBJECTIVES:**

During and after the camp, families are expected to:

- · Learn and share from each other;
- Inculcate family values of honesty, respect, responsibility, healthy living and sense of community;
- Strength family ties;
- · Apply what has been learned; and
- Make new friends

#### **QUALIFICATIONS OF PARTICIPANTS:**

- A family must have at least one (1) registered Girl Scout member.
- All participants must be physically fit and able to participate in all the event activities.
- 3. A family must have a minimum of three (3) members and maximum of five (5) members.
- Must be willing to learn and share from each other.

### THINGS TO BRING:

- 1. Complete Official Uniforms (for registered girl scouts participant)
- 2. Casual attire/Sunday dress
- 3. GSP Official Jogging Pants and GSP T-shirts for activities
- 4. Warm night wear or pajama
- 5. Personal effects, toiletries and towels
- 6. Jacket/Sweaters for Baguio cold weather
- 7. Rain coat and umbrella
- 8. Comfortable shoes and in-door slipper
- 9. Art materials for scrapbooking, family pictures
- 10. Musical instruments (optional)
- 11. Family Presentation of some talent to show land share
- 12. Outdoor tent and sleeping gears with some basic gadgets.

### **CAMP FEE:**

Php 1,700.00 per person (for Girl Scout and Non-Girl Scout Members)

Camp fee is inclusive of food, dormitory accommodation, and program.

Note: This includes the membership fee as GSP Associate Member for Non-Girl Scout.

A down payment of Php 500.00 per family member is required, No refund in case participant cannot attend during the event. Payment/s should be submitted on or before  $Sept \cdot 25$ , 2019 along their required forms.

Confirmation of participation must be made on or before September 25, 2019. All participants are required to submit the accomplished application and parent's consent forms for Girl Scout members, and Health Examination Form for Girl Scout and Non-Girl Scout members to be submitted on or before September 27, 2019 at GSP Baguio City Council Headquarters, Leonard Wood Road, Baguio City.

Attached are the registration form and parent's consent

We look forward to the active participation of our girls from the different Schools.

Thank you in advance for your continuing support to the Scouting Movement.

JENNIFER T. BUGTONG

Council Executive

To: School Administrators

Teacher's In-Charge

Elem.. & Secondary Teachers & Coordinators

(Public and Private)

FOR YOUR INFORMATION AND APPROPRIATE ACTION

MARIE CARLYN B. VERANO, CESO VI

School Division Superintendent/ Council Scout Commissioner



# 6th FAMILY GETAWAY CAMP

October 5-6, 2019
Ating Tahanan, National Program and Training Center
No. 6 Purok 1, South Drive, Bagulo City

## **APPLICATION FORM FOR GIRL SCOUT**

Council:		Region:	- (n it products - pro	
	PERSON	AL DATA		
Name:				
	Last	Middle	First	
Date of Birth:				
Home Address: Tel. No.:				
School:			Year:	
Parents/Guardian:				
Person to notify in c	ase of emergency:			
Relationship:				
Address:			Tel. No.:	
Special Interest/Hobbies:				
Religious Affiliation:				
Food Prohibition:		20112400 (000 0000 - 24 ) 40 (000 000 000 000 000 000 000 000 000		
Special Awards/Reco	ognition Received:			
	GIRL SCOU	TING DATA		
Date of Last Registra				
Troop No.:				
	GIDI SCOLITIN	G EXPERIENCE		
	Badges Earned	as a Girl Scout		
			· · · · · · · · · · · · · · · · · · ·	
		<del></del>		
Car	nps Attended	1	/5	
Camps Attended		V	enue/Date	
· · · · · · · · · · · · · · · · · · ·				
		<del></del>		
		Signatu	re of Applicant	
Endorsed by:				
Troop Leader			Date	
Approved by:				
	Council F			
N .	Council Executive		Date	
***************************************	Regional Executive Director	<del></del>	Date	



## 6th FAMILY GETAWAY CAMP

October 5-6, 2019 Ating Tahanan, National Program and Training Center No. 6 Purok 1, South Drive, Baguio City

## **HEALTH EXAMINATION FORM FOR CAMPER**

Council:	Region:	Region:	
Name:			
Last	Mid	ldle First	
Date of Birth:		Age:	
Home Address:		Tel. No.:	
Parents/Guardian:			
Person to notify in case of emer	gency:		
Relationship:			
Address:		Tel. No.:	
HEALTH HISTORY: (Check giving	approximate dates)		
Frequent Colds	Kidney Trouble	Chickenpox	
Ear Abscess	Convulsions	Mumps	
Fainting	Sleep Walking	Whooping Coughs	
Frequent Sore Throats	Measles	Sinusitis	
Heart Trouble	Bronchitis	Athlete's Foot	
Stomach Upsets	Rheumatic Fever	Constipation	
Tuberculosis	Operations or serie	ous Diabetes	
	injuries		
Allergic Reactions: Penicillin Details of the above or additions	injuries Other Drugs		
Penicillin Details of the above or additiona	injuries Other Drugs		
Penicillin  Details of the above or additions  Diet Requirement:  Regular	injuries Other Drugs		
Penicillin Details of the above or additions  Diet Requirement:  Regular	injuries Other Drugs al information		
Penicillin  Details of the above or additional  Diet Requirement:	injuries Other Drugs al information		
Penicillin  Details of the above or additions  Diet Requirement:  Regular  Any allergy you suffer:  IMPORTANT:  Please notify the	injuries Other Drugs al information Vegetarian	posed to any communicable dise	
Penicillin  Details of the above or additions  Diet Requirement:  Regular  Any allergy you suffer:  IMPORTANT:  Please notify the	injuries Other Drugs  al information  Vegetarian  c Camp if the applicant is exp	posed to any communicable dise	
Penicillin  Details of the above or additions  Diet Requirement:  Regular  Any allergy you suffer:  IMPORTANT:  Please notify the	injuries Other Drugs al information  Vegetarian  Camp if the applicant is experience weeks prior to camp attended  Attending	oosed to any communicable dise	



# 6th FAMILY GETAWAY CAMP

October 5-6, 2019 Ating Tahanan, National Program and Training Center No. 6 Purok 1, South Drive, Bagulo City

## PARENT'S CONSENT FORM FOR GIRL SCOUT

To whom it may concern:

This is to permit my daughter,	
of	Council to participate in the
6th Family Getaway Camp on Octob	per 5-6, 2019 to be held at Ating Tahanan
National Program and Training Cente	r (AT NPTC), No. 6 Purok 1, South Drive,
Baguio City.	
We will not bold the Oil O	
	uts of the Philippines responsible for any
untoward incident that may happen be	yond its control.
	Name of Parents
	Signature
	Address
	Date
Noted by:	
Council Executive	Date
Regional Executive Director	Date