Activity: 
Scout Group: 
Scout Zone / Region: 

Numbers: Kea, Cub, Scout, Venturer, Rover, Leader, Other, TOTAL

Please check the box(s) that best describes the planned activity.

**Activity Type A - Low Risk**
- Group event
- Zone event
- Region event
- National event

**Activity Type B - High Risk**
- Picnic
- Visit to town
- Visit a Group

Please describe:
- Abseiling
- Day hike
- Air activity
- Patrol activity
- Camping
- Tramping
- Caving
- Water activity (see note 3)
- Other

Activity details
Location of the activity .................................................................
Start time .................................................................
Return time .................................................................

Contact Details & Emergency Procedure
Activity Leader Name: ................................................................. Age (years) .................
Address ................................................................. Home Ph ...........................................
Work Ph ................................................................. Cell Ph .................................................................
Contact Person Name: .................................................................
Address ................................................................. Home Ph ...........................................
Work Ph ................................................................. Cell Ph .................................................................

Emergency Procedure
The contact person is to inform the Group Leader and the Police if the party has not made contact by:
Time ................................................................. Date .................................................................

Approvals
I accept responsibility for this activity
(date) (signature of activity leader)

Section Leaders approval
(date) (signature of section leader)

Group Leaders approval
(date) (signature of group leader)

Two Minute Activity Report
Activity type (A or B) - ............ Dates if different from above - start ............ return ............ No# of hours: ( ............)
Did the activity go as planned? Yes [ ] No [ ]
Briefly describe why the activity did or did not go as planned:

Were there any accidents or “near miss” incidents during the activity? Yes [ ] No [ ]
If so, please describe what happened or nearly happened:

Leader.................................................................................... (signature) Date ................... ..........................................

NOTES:
1. Complete page 1 for low risk Type A activities. Complete the entire form for all higher risk Type B activities or if you are unsure of the activity classification.
2. At least seven days before the activity, give four copies to your Group Leader and one to your Zone Leader for information. Group Leader returns one signed copy to the Activity Leader, one to the Contact Person and sends one to the Host Zone Leader.
   If there is no Group Leader the Zone Leader will nominate someone to act.
3. For all water activities including canoeing, kayaking, swimming etc. refer to Management Procedures clause 43 – Water Activities

March 2010 activity_intention_form.doc
### Type B Activities

#### Activity Plans

<table>
<thead>
<tr>
<th>Date</th>
<th>Route Description</th>
<th>Overnight at map reference</th>
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<tbody>
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</table>

Name of adult experienced in this activity (if and) assisting the leader

Phone

#### Alternate / Emergency Plans

<table>
<thead>
<tr>
<th>Date</th>
<th>Route Description</th>
<th>Overnight at map reference</th>
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#### Activity Participants

<table>
<thead>
<tr>
<th>Name</th>
<th>Telephone</th>
<th>Name</th>
<th>Telephone</th>
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</tr>
</tbody>
</table>

Vehicle make / model - .......................................................... Colour - .......................................................... Plate No# - ..........................................................
Vehicle make / model - .......................................................... Colour - .......................................................... Plate No# - ..........................................................
Vehicle make / model - .......................................................... Colour - .......................................................... Plate No# - ..........................................................
Parked at: ..........................................................................................
**Activity Checklists**

**Activity:**

**Use this activity checklist for type B higher risk activities so that essential points are not overlooked.**

The Group Leader may want to see this checklist. The Water and Air Activity Advisers may also ask to see it as well if the planned activity is within their area of responsibility and they have any concerns.

Keep in mind the reason for the Activity Checklist and Activity Intention form is to help ensure the safely of and minimise the risk to the young people taking part in the activity.

---

**At least 1 week before the activity**

Check each box if the condition is applicable and has been met.

- The Activity Intention Sheet has been completed with copies given to the Group Leader, Zone Leader, and the Contact Person.
- The Activity Leader or other adult accompanying the party has experience in this activity.
- The activity is within the capabilities of all members of the party.
- All members of the party have received a personal gear list.
- The party has at least two compasses and two current maps relevant to the area involved.
- The party has organised a Mountain Radio / Cell phone. - Call sign or phone number - ......................................................................................
- There is a competent first aid person in the party.
- The arrangements for clean drinking water are: Tablets ☐ Filtering ☐ Boiling ☐
- The camp site (if any) has been verified as being suitable for the activity, e.g. flooding, wind etc.
- A copy of this checklist is attached to the Activity Intention Sheet.
- The members of the party have been trained and are equal to the challenge of the activity. e.g. fitness, rock climbing, bushcraft, river crossing, canoeing, sailing, swimming, navigation, weather.
- The season is suitable for this type of activity. e.g. snow, storms, wasps, wind etc.
- Transport has been arranged and confirmed. Drivers: - ..................................................................................................................

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**Notes**

...........................................................................................................................................................................................
...........................................................................................................................................................................................
...........................................................................................................................................................................................
...........................................................................................................................................................................................

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Signed by the Activity Leader Date Approval by Group Leader Date
Use this activity checklist for type B higher risk activities so that essential points are not overlooked.

The Activity Leader is to retain page two for the final check before commencing the activity.

The Group Leader will have a blank copy and may check off the items during the telephone discussions.

### The week before the activity

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>Confirm who will be taking part and check their personal details, e.g. contact phone numbers etc.</td>
<td></td>
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<tr>
<td>Check that there are no new health problems or concerns with the party members.</td>
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<tr>
<td>All parents and caregivers have been advised of the activity and have provided signed consent forms.</td>
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<tr>
<td>The contact person has been given an up to date copy of the Activity Intention Sheets and has been briefed as to their responsibilities.</td>
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<tr>
<td>The party members gear has been checked to ensure they have the correct equipment.</td>
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<tr>
<td>The Forest and National Park Headquarters have been informed if the party is entering a park.</td>
<td></td>
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<tr>
<td>The Royal New Zealand Coastguard has been informed of voyage details.</td>
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<tr>
<td>Other: - ..............................................................................................................</td>
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</tbody>
</table>

Discussed with the Group Leader Date ................................................... Time ..................................................

### Before leaving on the activity

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>The weather forecast has been checked and is suitable for the activity to proceed.</td>
<td></td>
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<tr>
<td>The list of party members' names has been updated and the contact person has any changes.</td>
<td></td>
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<tr>
<td>The contact person has any changes to the radio or cell phone contact schedule.</td>
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<tr>
<td>The transport arrangements have been confirmed.</td>
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</tbody>
</table>

Discussed with the Group Leader Date ................................................... Time ..................................................

It is particularly satisfying for you as a leader to have led a group of young people who have experienced a challenging and enjoyable activity.

Plan ahead, use Activity Checklists and Risk Management Flow Charts to minimise the risks and avoid negative experiences.