



Raft Team Information

THIS FORM MUST BE HANDED IN AT PREREGISTRATION.

PLEASE NOTE REQUIREMENT FOR TROOP SCOUTER/COMPANY GUIDER TO ENDORSE THIS LIST AT BOTTOM OF FORM.

AN INDEMNITY/PARENT CONSENT FORM FOR EACH TEAM MEMBER MUST ACCOMPANY THIS FORM PLEASE. EACH MEMBER MUST HOLD THEIR SWIMMING BADGE FOR SCOUTS OR GUIDES.

PLEASE PRINT:

NAME OF TROOP/COMPANY: _____

TEAM RAFT NUMBER: _____

		AGE	GENDER		DATE OF BIRTH		
			M	F	DD	MM	YY
TEAM LEADER	1				DD	MM	YY
TEAM MEMBERS	2				DD	MM	YY
	3				DD	MM	YY
	4				DD	MM	YY
	5				DD	MM	YY
	6				DD	MM	YY

NB: THIS LIST COUNTS FOR POINTS - SCRAP PAPER NOT ACCEPTABLE

SIGNED: _____
TEAM LEADER

TROOP SCOUTER/COMPANY GUIDER ENDORSEMENT (Must be completed before entry is accepted)

I do hereby confirm that the team list of members who will be on the raft during the Kon-Tiki competition is correct and each of these members holds the necessary Swimming badge.

PRINT NAME	SIGNATURE	DATE



Fringe Team Information

THIS FORM MUST BE HANDED IN AT PREREGISTRATION.

COMPLETE ONE FORM FOR EACH FRINGE TEAM ENTERED

AN INDEMNITY/PARENT CONSENT FORM FOR EACH TEAM MEMBER MUST ACCOMPANY THIS FORM PLEASE. ALL TEAM MEMBERS MUST NOT YET HAVE TURNED 18 YEARS OLD.

PLEASE PRINT:

NAME OF TROOP/COMPANY: _____

TEAM RAFT NUMBER: _____

	Full Name of Team Member	Age	Band Collected? (Office use only)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

NB: SCRAP PAPER NOT ACCEPTABLE

PRINT NAME: _____ SIGNED: _____

T E A M L E A D E R

FRINGE LEADER CELL NUMBER: _____

**SCOUTS South Africa
Western Cape Province**



Cell Phone Registration Form

TO BE COMPLETED AND HANDED IN AT KON-TIKI HEADQUARTERS ON ARRIVAL AT THE BASE ON FRIDAY. MUST BE HANDED IN NO LATER THAN 17H00 ON FRIDAY.

THE CONTACT PERSONS CELL PHONE NUMBERS MUST BE FOR PERSONS ON THE RAFT AND AT THE BASE FOR THE DURATION OF THE EVENT. THE TROOP SCOUTER/COMPANY GUIDER INFORMATION MUST ALSO BE COMPLETED, WHETHER AT THE BASE OR NOT.

Ensure that you have sufficient air time for the weekend.

PLEASE PRINT:

NAME OF TROOP/COMPANY:

TEAM RAFT NUMBER:

RAFT CELL PHONE INFORMATION

CELL PHONE NUMBER

Team Leader

NAME	<input type="text"/>	NO.	<input type="text"/>
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Team 2nd

NAME	<input type="text"/>	NO.	<input type="text"/>
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FRINGE TEAM CELL PHONE INFORMATION

CELL PHONE NUMBER

Team Leader

NAME	<input type="text"/>	NO.	<input type="text"/>
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Team 2nd

NAME	<input type="text"/>	NO.	<input type="text"/>
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(Please include additional fringe team cell phone details on the back of this form)

CAMPERS CELL PHONE INFORMATION

Adult-In-Charge
Name:

Cell Phone Number

TROOP SCOUTER/COMPANY GUIDER CELL PHONE INFORMATION

Scouter/Guider
Name:

Cell Phone Number

Must be handed in no later than 17h00 on Friday