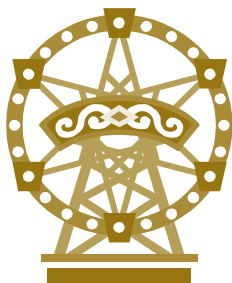


# Brownies Wicksteed Park



Spring 2010

**Cost: £25, including transport from a local pick-up point, admission and all activities**



**Come out for a fun-filled day at Wicksteed Park.**

**Attractions include water rides, roller coasters, traditional fairground rides and shows, not forgetting a ride on the Wicksteed Railway.**

Send in a Booking Form marked “Centenary Event - Wicksteed” with your deposit by 30th September 2009. We will need full details and payment for your booking by 31st January 2010.



General Enquiries: Eileen Melling  
Bookings: Chris Lovell



## Information for Leaders

Costs: All under 18's £25 per person this includes:

- ü Coach Travel from a local pick up point
- ü Wrist band for rides
- ü Goodie bag
- ü Souvenir badge of the day

All adults £15 per person this includes:

- ü Coach Travel from a local pick up point
- ü Goodie bag
- ü Souvenir badge of the day

All units will receive one complimentary wrist band for adults, further bands can be purchased in advance for £10 or tickets on the day £1 each or sheets of 12 for £10 (this price is subject to change after November 2009)

### Rides

Some rides require girls to be accompanied by an "responsible person 14yrs or above"

There are also height restrictions for some rides - details will follow in the brochure, however there are plenty rides all girls can enjoy, PLUS a large playground that is free

### Health and Safety

All units must ensure they have the appropriate adult/girl ratio

Units must carry a first aid kit - any accidents/incidents must be reported to the organisers based in the Pavilion. Wicksteed Park will provide additional first aid where required.

Lost Children - the pavilion will have Girlguiding Leicestershire members present and girls should make their way to here, leaders will be contacted if a brownie becomes split from the group

Permission Slips a parental permission slip will be issued by the organisers Leaders are responsible for issuing and collecting the slips. Please remember to bring them on the day

### Wrist Bands

Wrist bands will be disturbed before the day, please write a contact mobile phone number on each band, also a large RED dot if they do not have parental permission for publicity



COMPLETE IN BALL-POINT PEN IN BLOCK CAPITALS. DELETE STARRED \*ITEMS AS APPROPRIATE

**THIS PART TO BE KEPT BY PARENT / CARER\***

Please return the lower section of this form, completed and signed, to your Leader by .....2009

Girlguiding Leicestershire's Brownies Take Over Wicksteed will take place on Saturday 15<sup>th</sup> May 2009. The coach will leave..... there at ..... Please wear uniform (not sashes or neckers) with trainers and bring a waterproof coat. Please bring a packed lunch

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Leader)



**PARENT OR CARER'S\* CONSENT FOR ANYONE AGED UNDER 18**

This section should be returned to the Leader on or before 26<sup>th</sup> June 2009

- I have noted the arrangements and I give my permission for my daughter/ward\* ..... (name) to attend the Girlguiding Leicestershire Brownies Take over Wicksteed on Saturday 15<sup>th</sup> May
- I understand that any surplus made from this event will be used to support Girlguiding in Leicestershire

- I am happy for photographs of my daughter/ward* to be used in Girlguiding publicity or publications, or in local newspapers.	<b>*YES / NO</b>
- I am happy for photographs of my daughter/ward* to be used on Girlguiding websites.	<b>*YES / NO</b>
- I give permission for my daughter/ward* to walk around the Launch in a group of at least 4 without Leaders (this only applies if she is at least 10 years old)	<b>*YES / NO</b>

To run this event successfully, it is important to know of any special needs which have to be met. Please complete this section as fully as possible; use a separate sheet if necessary.

Does she have any faith or cultural needs e.g. dress, diet, toilet arrangements? **\*YES/NO**  
**If YES, please give details:** .....

Does she have any dietary requirements e.g. medical, religious? **\*YES/NO**  
**If YES, please give details:** .....

Does she have a disability or condition that might be affected by this activity? **\*YES/NO.**  
**If YES, please give details:** .....

Please indicate details of any medical treatment she is having at the moment.  
.....

May she, under supervision, take part in the following activities? Age and height appropriate rides

In an emergency, you should contact the following person:

Surname: \_\_\_\_\_ First Names: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

( daytime: \_\_\_\_\_ È mobile: \_\_\_\_\_

I give permission for any emergency dental, medical or surgical treatment, including anesthetic, as considered necessary by the medical authorities present.

Signed: ..... Please print name: .....  
Parent / Carer \*

Date: .....