



AUTHORISATION FOR ABSEILING – AA Form 01

Name of Scout Group

Address

Date of Abseiling Activity Location

Risk Assessment of Site Yes / No Approx. Duration of Activity

Number of Adult Leaders Number of Adult Instructors Number of Adult Helpers

Number of Participants Under 18 Over 18

Name of Scouter organising the Abseiling Activity:

Full Name ID Card Nr Mobile Nr

Association Membership Number Current IHQ Appointment

Name of Scouter/Other under whose instruction/leadership abseiling activity will be taking place:

Full Name ID Card Nr Mobile Nr

Association Membership Number Current IHQ Appointment

Certification by Certificate Nr Validity up to

Other Instructors/Assistants:

Full Name ID Card Nr Mobile Nr

Certification by Certificate Nr Validity up to

Full Name ID Card Nr Mobile Nr

Certification by Certificate Nr Validity up to

Full Name ID Card Nr Mobile Nr

Certification by Certificate Nr Validity up to

AA Form – Version 1.0 11 March 2012

Signature – Scouter in Charge of Activity

Date

Approved on

Signature – Group Scout Leader

Signature – District Commissioner

Signature – Chief Commissioner

Island Headquarters

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