**SOAR – British Columbia**

**Spirit of Adventure Rendezvous 2020**

**APPLICATION FORM – GIRL MEMBERS**

**Return to:** [**qc-international@guidescanada.ca**](mailto:qc-international@guidescanada.ca) **before the December 1, 2019 deadline**

**Part A. Personal Information**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Name: |  | | | | | | | | | |  |  | | | | |  |
|  | Last name | | | | | | | | | |  | First name | | | | | |
|  | | | | | | | | | | | | | | | | | |
| Birth date: | |  | | | | Membership (iMIS) #: | | | | | | | | |  | |  |
| year/month/date | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| Address: | |  | | | | | | | | | | | | | | |  |
|  | | No. Street | | | Apt. No. P.O. Box or R. R. No. | | | | | | | | | | | |  |
|  | |  | | | | |  |  | | | | | | |  |  |  |
|  | | City | | | | | | Province /Territory Postal Code | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| Phone: | Home | | | (    ) | | | | |  | Other | | | | (   ) | | |  |
|  | Cell | | | (    ) | | | | |  | (Specify) | | | |  | | |  |
|  | | | | | | | | | | | | | | | | | |
| Email address: | | |  | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | |
| Guiding District | | | | | | | | | | | | |  | | | |  |
|  | | | | | | | | | | | | | | | | | |
| Number of years of GGC Membership: | | | | | | | | | | | | |  | | | |  |
| I am also applying for Nationally Sponsored travel and/or Camp Brave for 2020 \_\_\_yes \_\_\_ no | | | | | | | | | | | | | | | | | |

**Part B. Participant Agreement**

I understand that by submitting this application and if selected, I will be representing Girl Guides of Canada-Guides du Canada Québec Council at the BC Council International camp, SOAR, to be held near Sooke BC, from July 24 to August 1, 2020 . In light of that:

1. I will prepare for this camp as required.
2. I will positively represent Girl Guides of Canada-Guides du Canada to all persons I meet throughout this experience.
3. I understand that I will be expected to share my experiences within GGC, as may be further specified.
4. I agree to be an active member of GGC for a minimum of one year following the event.
5. I will adhere to the roles and responsibilities expected of the event’s Guiders/Volunteers.
6. I confirm that I meet the qualifications of the General Reference Guidelines for SOAR

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| Applicant’s name | | |  |
|  |  |  |  |
| Applicant’s signature |  | Date |  |

**Part C. Guarantee of Financial Responsibility**

Permission is hereby granted for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

to attend SOAR in Sooke BC in 2020.

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| Parent/Guardian’s name | | |  |
|  |  |  |  |
| Parent/Guardian’s signature |  | Date |  |

Address (if different from participant’s)

|  |  |  |  |  |  |  |  |  |  |
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|  | | | | | | | | | |
|  | | No. Street | | Apt. No. P.O. Box or R. R. No. | | | | | | | |  |
|  | | |  |  | | | |  |  |  |
| City | | | | Province /Territory Postal Code | | | | | | |
| Phone: | Home | | (    ) | | | |  | Email |  | | |

Financial responsibility for costs will be guaranteed by:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | | |  |  |
| name | | |  | signature | |
|  |
| Date |

Address (if different from above)

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|  | | | | | |
|  | No. Street | Apt. No. P.O. Box or R. R. No. | | | | |  |
|  |  | |  |  |  |  |  |
|  | City | | | Province /Territory Postal Code | | | |

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| --- | --- | --- | --- | --- | --- |
| Phone: | Home | (    ) |  | Email |  |

*By submitting this application form to Girl Guides of Canada, parents/guardians accept and agree to the financial responsibility associated with the event and as such this agreement and application can be accepted electronically without original parent/guardian signature*

Note: Girl members are encouraged to fundraise for their event costs. Québec Council will sponsor 80% of this camp`s fee and travel cost. Members must pay 10% of this cost themselves, and the remaining 10% (maximum) can be offset through fundraising. The event is is eligible for a higher profit from the sale of travel cookies, which must be ordered mid January through the provincial office. The sale of these cookies is the responsibility of the individual or group that orders them. Fundraising guidelines will be shared with successful applicants. They are also available on Member Zone (ask your Guider to help you access these). See Governance Policy - Fund Development.

**Part D. References**

Please provide the name and contact information for your two references.

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| *Within Guiding (someone who has camped with you, not a relative):* | | | | | |
| Name: |  | |  |  |  |
|  | Last name | |  | First name |  |
| Phone: | (     ) | Email: | |  |  |
|  | | | | | |
| *Outside of Guiding (non-family member):* | | | | | |
| Name: |  | |  |  |  |
|  | Last name | |  | First name |  |
| Phone: | (     ) | Email: | |  |  |
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**Part E. Self-evaluation**

Please provide examples of how you have demonstrated each quality or skill.

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| **I adapt effectively to different situations.**  e.g. Last year I went on a class trip, I made new friends and had lots of fun exploring a new city. |
| **I work well as part of a team.** |
| **I am a good problem solver.** |
| **I am comfortable being away from my family.** |
| **I am considerate of others.** |
| **I am respectful of people’s differences.** |
| **I am reliable.** |
| **I deal well with changes in plans.** |
| **I am physically active.** |
| **I am knowledgeable about Girl Guides of Canada.** |
| **I am a good ambassador and will share my Quebec experience.** |

**Part F. Relevant Experience**

1. Have you spent time away from your family? Yes  No

If yes, please describe below:

|  |
| --- |
| How long did you spend away? \_\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Where did you go? \_\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Who did you go with? \_\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

2. Do you have camping experience? Yes  No

If yes:

|  |
| --- |
| What types of camps have you attended? |
|  |
| What is the length of the longest camp you attended? |
|  |
|  |
| What specialized skills have you gained from camps you attended? |
|  |
| Describe one or two of your favourite camps and explain why they were your favourites. |

**Part G. Event Interest**

In 600 words or less, explain:

* Why does this event in particular interests you
* What specific knowledge and skills you would bring to the group which would make you a great participant
* What you expect to learn from this experience
* How you can use the experience to enhance the Guiding program
* ***Please do not submit resumes or copies of certificates, diplomas, pictures, graphics, etc.***

*Use a separate sheet if necessary*

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*We protect and respect your privacy. Your personal information is used only for the purposes stated on or indicated by the form. For complete details, see our Privacy Statement at* [*www.girlguides.ca*](http://www.girlguides.ca) *or contact your provincial office or the national office for a copy.*