

To be completed by the Responsible Guider prior to undertaking Yellow and Red activities or International Travel Under 72 hours.

Guiders – Keep this form and submit as part of the [Safe Guide Retention Package](#).

Attention ANY, BC, NB, NL, NS, ON, PEI and SK Guiders!
Do not fill out this form. You will complete the SG.3 form in the GGC portal.
Complete all other required forms and have them ready for upload to the GGC Portal.

Level/Activity (Check **ALL** that apply): Yellow Red Water Activity International U72 Hours TPSP

| | | |
|---|---------------------------------|---|
| Unit: <u>1st Layer Cake Guide Unit</u> | | Today's date: <u>August 23, 2022</u> |
| Activity/event/camp: <u>Camp Skills Day</u> | | Cost per girl: \$ <u>5</u> |
| Start date & time: <u>September 18, 2022 at 10 am</u> | | End date & time: <u>September 18, 2022 at 4pm</u> |
| Responsible Guider: <u>Mary Jane Winters (aka Sunflower)</u> | | iMIS #: <u>123456</u> |
| Home phone: <u>250-123-4567</u> | Cell phone: <u>778-123-4567</u> | Bus. phone: |
| E-mail: <u>mjwinter@gmail.com</u> | | |
| Participants are from: District <u>Layer Cake</u> and Area: <u>Monashee</u> or Admin Community | | |
| Anticipated # of Participants | | |
| Sparks: <u> </u> Embers: <u> </u> Guides: <u>16</u> Pathfinders: <u> </u> Rangers: <u> </u> Extra Ops/Trex: | | |
| # of non-member children (i.e. staff children): Must be included in ratio | # of Supervisors: <u>3</u> | Other adults (specify): |
| List activities or plans related to this activity (use information provided to parents on SG.1): <u>We will be practising our camp, outdoor and Be prepared skills. Activities will include intro to canoeing, map and compass skills, fire building and cooking on a fire, nature observations, knots and basic first aid</u> | | |

| Role (First aider, substitute group leader, supervision, activity facilitator, cook, etc.). | Adults in attendance List all supervisors and adults attending. Attach a separate sheet if needed. | iMIS # | Attending full event? | | Guider | Non-Member PRC | |
|--|---|---------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|
| | | | Yes | No | | Yes | No |
| First aider | <u>Samantha First</u> | <u>987654</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Copy of certificate(s) attached <input type="checkbox"/> Certificate is in iMIS <input type="checkbox"/> Health care professional Other: | | | | | | | |
| Substitute group leader | <u>Patty Last</u> | <u>567891</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

* See Safe Guide requirements for non-members for overnights and if volunteering regularly.

Home Contact Person (when applicable – camps, day trips away from the community, travel, wilderness tripping, etc.)

| | | |
|--|---|-------------------------------|
| Name: | Member: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | iMIS #: <u>36589456</u> |
| Home phone: <u>2501112222</u> | Bus. phone: | Cell phone: <u>7781112222</u> |
| E-mail: <u>hcp@gmail.com</u> | | |
| If non-member has A.7 been submitted <input type="checkbox"/> Yes (required) | | |

Location

| |
|---|
| Name of facility, park, trail system, lake system, etc.: <u>Camp Arbuckle 4705 Carrs Landing Rd, Lake Country BC</u> |
| If using a facility, address info has been provided on Activity Plan (SG.1) Yes <input checked="" type="checkbox"/> (must be provided) |
| If tripping, general area of trip: |
| Have any of the supervisors been to this location/facility/site before? Yes <input checked="" type="checkbox"/> – When? <u>Provide month and Year</u> |
| No <input type="checkbox"/> – How will/was information about the facility/site/area (be) obtained? |

Activity Planning Chart – indicate with an X the factors that relate to your activity.

***See Key Terms in Safe Guide for definitions of these terms.**

| Factors Affecting Activity Planning | Activity Level | | |
|---|--|-------------------------------------|--------------------------|
| | Green | Yellow | Red |
| PEOPLE | | | |
| Attending a Large Group Event | <input type="checkbox"/> | | |
| Girls in groups unaccompanied during a portion of an event* | | <input type="checkbox"/> | |
| Use of a Third Party Service Provider* | Refer to the Third Party Service Provider Activity Guide in Safe Guide | | |
| PLACE | | | |
| Transportation: | | | |
| Arranged by unit using public transportation (transit, taxi, bus, charter bus, train, ferry, commercial boat tours) | <input type="checkbox"/> | | |
| Renting a vehicle (car, van, truck) | | <input type="checkbox"/> | |
| Walking in a parade | <input type="checkbox"/> | | |
| Riding on a float in a parade, hayrides, sleigh rides | | <input type="checkbox"/> | |
| Commercial air travel | Refer to the Travel in Canada Activity Guide | | |
| ENVIRONMENT | | | |
| EMS response time: (See Key Terms in Safe Guide) | | | |
| EMS response available within 30 mins | <input checked="" type="checkbox"/> | | |
| EMS response 30 mins up to 1 hour | | <input type="checkbox"/> | |
| EMS response time greater than 1 hour and less than 4 hours | | | <input type="checkbox"/> |
| EMS response time greater than 4 hours | | | <input type="checkbox"/> |
| Food preparation: | | | |
| Campfire with no cooking | <input type="checkbox"/> | | |
| Preparing food / cooking in typical kitchen | <input type="checkbox"/> | | |
| Sparks/Embers/Guides - cooking on a camp stove, campfire or BBQ | | <input checked="" type="checkbox"/> | |
| Pathfinders/Rangers - cooking on a camp stove, campfire or BBQ | <input type="checkbox"/> | | |
| Equipment: (see Key Terms in Safe Guide) | | | |
| Ordinary equipment | <input type="checkbox"/> | | |
| Specialized equipment | | <input type="checkbox"/> | |
| Power equipment | | | <input type="checkbox"/> |
| ACTIVITY | | | |
| Situation specific: | | | |
| Activity takes place overnight (regardless of duration) | | <input type="checkbox"/> | |
| Adventure activities* | | | <input type="checkbox"/> |
| Water Activities: (refer to Swimming or Boating Planning Guide) | | | |
| Swimming/boating in a public pool or waterpark where the facility provides aquatic supervision | <input type="checkbox"/> | | |
| Other water activities (swimming or boating) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Travel/International Travel: | | | |
| Travel in Canada | Refer to the Travel in Canada Activity Guide | | |
| International travel under 72 hours. | Refer to the International Travel Under 72 Hours Activity Guide | | |
| International travel 72 Hours or more | Refer to the International Travel 72 Hours or More Planning Guide | | |

Conditional Activities

These activities have insurance conditions and the SG.5 must be signed. (See Safe Guide Appendix B)

- | | | |
|---|---|---|
| <input type="checkbox"/> Alpine skiing/snowboarding | <input type="checkbox"/> Boating with TPSP | <input type="checkbox"/> Helicopter travel |
| <input type="checkbox"/> Horseback riding | <input type="checkbox"/> Rock climbing on natural rock face | <input type="checkbox"/> Scuba diving in pool |
| <input type="checkbox"/> Surfing at a beach or waterfront | <input type="checkbox"/> Trampoline park | <input type="checkbox"/> Waterskiing |
| <input type="checkbox"/> Whitewater rafting | <input type="checkbox"/> Riflery/Biathlon | |

Forms list:
Activity Approval

The following documents are attached:

- Activity Plan (SG.1)
- Emergency Response Plan (SG.4)

As required the following are also attached:

- Water Activity Plan (WA.1)
- Activity Facilitator Certification or Qualifications
- Waiver (SG.5) if adventure* or a conditional activity*
- Itinerary and/or Adventure Activity Trip Plan (SG. 6) if relevant

For Third Party Service Provider* activities:

- Third Party Service Provider Interview Checklist (SG.7)
- Information about the TPSP is attached *OR* TPSP web address:

Parent/Guardian Permission forms

Complete the following forms and give to parents/guardians:

- Activity Planning form (SG.1)
- Parent/Guardian Permission (SG.2) with additional details about the activity as necessary.
- Waiver (SG.5) if Adventure Activity* or a Conditional Activity*
- Personal Health Form (H.1)

As Responsible Guider, I will coordinate the Safe Guide procedures for the activity described on this form.

Signature: _____ Date: _____

iMIS #: 123456 if iMIS number is included, a signature is not required.

Approval:

Name of Assessor:

Date approved:

E-mail:

Phone:

Signature of Assessor:

e-signature accepted