Crean Challenge 2026

Declaration Form

Scout Applicant Name	
Date of Birth	
Scout Group	
Scout County	
Group Leader Name	
Group Leaders Email Address	
Section Leader Name	
Section Leaders Email Address	

I confirm that the applicant is a registered active member of the Scout Group

☐

I confirm I am willing to facilitate the applicant in training and preparation for the event.

☐

I confirm that the section leader has been informed of the scouts application.

☐

This applicant would be suitable for the event because:

Group Leader Signature _____ Date _____