

STAFFORDSHIRE COUNTY SCOUT COUNCIL - EXPLORER UNIT RETURN

CENSUS DATE: JANUARY 2006

FORM 6

Please can you return this information as well as completing the census as we need this for local records, and for applications for funding

EXPLORER SCOUT UNIT INFORMATION - 2006

DISTRICT			
UNIT			
ADDRESS OF MEETING PLACE			POSTCODE
Are these premises -	Owned?	Private Rented?	School Premises?

MEETING NIGHT (Please estimate this information)

DAY	FROM	TO	NO. WEEKS OPEN PER YEAR	AVERAGE ATTENDANCE PER WEEK (NUMBERS)	CAMPS (Please estimate <u>all</u> other activities) Total number of days for each young person spent on other activities (for example, a 2 daycamp with 14 Explorer Scouts would count as 28 days)

ADULTS (Please include name only unless the other details have changed; include all adults who are members)

APPOINTMENT	NAME	ADDRESS	POSTCODE	TELEPHONE NO.	E-MAIL ADDRESS
ESL (Leader/Contact)					
AESL					
AESL					
AESL					
AESL					

SIGNED:

APPOINTMENT:

DATE: