**Guiders – Keep this form and submit as part of the** [**Safe Guide Retention Package**](https://mz.girlguides.ca/web/MZ/Guider_Resources/Safe_Guide_SubPages/SGPC_Form.aspx)**.**

Activities are organized according to Girl Guides of Canada’s Safe Guide. Safe Guide sets procedures for activity management including supervision, training, equipment, and health matters. A copy of Safe Guide is available from [www.GirlGuides.ca](http://www.girlguides.ca/).

**If your daughter/ward has any needs or disabilities that may require accommodation, disclosing and discussing them with us will help us accommodate her.**

**Parents/Guardians – please keep this sheet for your information!**

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| --- | --- | --- | --- | --- | --- | --- |
| ACTIVITY INFORMATION | | | | | | |
| Name of activity: Activity Day, Medievel Merriment DAY | | | | | Today’s date: Aug 31/2025 | |
| Unit Name(s): Community 1 | | | | | | |
| Council: | | | District or Administrative Community: 1 | | | |
| Responsible Guider: | | | | | Cost (including GST/HST): $ 20 day | |
| Activity Start | | Date: Oct. 18 2025 | | Activity End | | Date: Oct, 18 2025 |
| Time: 9:30 | | Time: 3:30 |
| **List of planned activities:** *(Not enough space? Attach an activity plan to this form)*  Journey back to a time of knights, castles, and dragons at our Medieval Merriment Activity Day!  Our maidens are invited for a day of epic adventure. Our youth will get to train like true medieval heroes with activities like:  • Knight Training  • Archery Challenge (G/PF)  • Castle Crafts  • Maltese Brawl  Come dressed in your best medieval attire and be prepared for a day of fun and fantasy! | | | | | | |
| A detailed itinerary is attached: Yes  No | | | | | | |
| **Third Party Service Provider (TPSP) Activity Facilitators**  List all TPSPs that will be present during the activity and what services they will provide. *(Not enough space? Attach another page to this form)* | | | | | | |
| A TPSP waiver is attached and required to be completed in order to participate. | | | | | | |
| Location Information | | | | | | |
| Location or facility name: SunshinePoint Kiwanis Cap | | | | | Contact number: | |
| Address: | 955 Essex County Rd 50 Harrow On N0R 1G0 | | | | | |
|  | Street Address City/Town Prov Postal Code | | | | | |
| Brief description of facility/site: 5 acres of land on the shores of Lake Erie in Harrow. with running municipal water. There are indoor washrooms, and building. It has 6 cabins for overnight. Playground area and large campfire pit. | | | | | | |
| For overnights, type of accommodation:  Meeting hall  Camp Building  Tent  Hotel  Hostel  Other (please list): | | | | | | |
| Supervision | | | | | | |
| Minimum supervision ratios will be Supervisors 1 to girls 7.  Mandatory minimum supervision ratios can be found in [Safe Guide](https://mbr.girlguides.ca/Documents/MZ/SafeGuide/SafeGuide.pdf). | | | | | | |
| How will girl be supervised during the activity? For overnight include information about where girls and Guiders be sleeping and how girls will be supervised overnight. *(Not enough space? Attach another page to this form)*  For the day activity, Girls will be supervised by their leaders as they move through the activities of the day on a round robin schedule. Unit Guiders will be responsble that all girls are picked up and once all youth are gone they will report to responsble Guiders that their unit is gone home | | | | | | |
| Transportation Information | | | | | | |
| Parent/guardian/caregiver will provide transportation to and from activity:  Yes  No | | | | | | |
| Arrangements for transportation: Own | | | | | | |
| Drop-off time: 9:30 am | | | | Drop-off location: Kiwanis Sunshine Camp | | |
| Pick-up time: 3:30 pm | | | | Pick-up location: Kiwanis Sunshine Camp | | |
| **Drivers must ensure that owner of a vehicle has appropriate insurance.** Because of the way vehicle insurance is organized in Canada, coverage is only available through the vehicle owner. The owner is responsible for maintaining their vehicle insurance and for any injury to anyone or physical damage to their vehicle, another vehicle, resulting from its use for a GGC sanctioned activity. | | | | | | |
| What to bring *(Not enough space? Attach kit list to this form)* | | | | | | |
| Spending money: $ Nil | | | | Equipment: | | |
| Food: Provided | | | | Other: | | |
| Clothing: Dress for weather | | | | Kit list attached: Yes  No | | |

|  |  |
| --- | --- |
| **For more info before the activity:** | **Contact information during the activity:** |
| Guider’s name: Kimberly Watters | Guider’s name: Kimberly Watters |
| Phone number: 226 280 1853 | Phone number: 226 280 1853 |
| E-mail: nana.kimberlywatters@gmail.com | E-mail: nana.kimberlywatters@gmail.com |