



**NORTHERN REGION
VENTURERS
UNIT MANAGEMENT
COURSE
7th – 8th OCTOBER 2017**

WHEN?

Saturday 7th & Sunday 8th October 2017

This is a **ONE & HALF DAY COURSE**.

- Registration is from 1230hrs Sat 7th Oct. 2017
- Opening parade 1300hrs sharp.
- 1st Session finishes at 1830hrs to allow the conducting of Northern Region Venturer Council meeting.
- Final Parade 1530hrs Sunday 8th Oct. 2017.
- Full Uniform required for opening parade and final parade.

WHERE?

Benalla Scout Hall, Cnr Lowry Place & Smyth St Benalla, Refer Google Maps

HOW MUCH?

\$40.00 – fully catered course.

WHAT TO BRING

- Sleeping Gear, Personal Gear, Comfortable clothes, Uniform, Munchies, Pen and Paper etc.
- PLUS YOUR VENTURER RECORD BOOK (a.k.a. “Passport”)
- **Energy drinks are not permitted.**

WHAT WE SUPPLY

- Afternoon Tea, Evening Meal, Morning & Afternoon Tea, Lunch.
- BYO Breakfast.
- Course booklet and certificate of completion, laid-back session co-ordinators and lots of fun!!

WHEN DO APPLICATIONS HAVE TO BE IN?

- MONDAY 12TH September 2017
- But this course usually fills way before the due date, so don't delay!!
- Late applications will not be accepted.

HOW DO YOU APPLY?

Complete the attached Venturer Training Application TR1V. Provide a Personal Information Record OR CareMonkey form and forward to;

Ian Collins Course Administrator

NR - Unit Management Course OR icoll@bigpond.com

1214 Invergordon Rd

Invergordon 3636

HOW DO YOU PAY?

CHEQUE: Make cheques payable to “Northern Region Venturers”

DIRECT DEPOSIT: Account name – Northern Region Venturers. BSB: 083 894

Account number: 83004 7086 – please put your name as reference & UMC.

Email details of direct payment to icoll@bigpond.com

IF YOU HAVE ANY QUESTIONS?

Course Leader: Julie Johnson 0438 268 395



SCOUTS AUSTRALIA

Victorian Branch

FORM TR1v

Feb 2011

VENTURER TRAINING APPLICATION

Registration Number

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Scout Code Number

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Name of Applicant Mr Miss

Surname

First Given Name

Second Given Name

Postal Address.....

Town /SuburbP/Code.....

Private TelephoneMobile.....

Email.....

COURSE APPLIED FOR:

Course Title.....

Date/s.....

Location.....

Unit

District

Region

Date of Birth:

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 Religion.....

Signature of Applicant..... Date.....

Signature of Unit..... Date.....

Signature of Leader..... Date.....

INFORMATION TO ASSIST COURSE LEADER

Preferred Name (for course name tag)

Medical / Physical Limitations of Applicant

Special Dietary Particulars

Courses already Completed

Invested	Yes / No	Date
Venturing Skills Award	Yes / No	Date
Unit Management Course Completed	Yes / No	Date
Initiative Course Completed	Yes / No	Date
Leadership Course Completed	Yes / No	Date

PAYMENT: Please make Cheques payable to Scout Association, Victorian Branch.

Cheque: Cash:

Course Fee \$..... Payment Received \$..... Cash Cheque Receipt No..... Refund No.....