



**World Scout Bureau, Asia-Pacific Regional Office
Bureau Mondial du Scoutisme, Bureau Régional Asie-Pacifique**

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CIRCULAR NO.05, series of 2012

To: Chief Commissioners
International Commissioners
Chief Scout Executives

11 January 2012

11th Nippon Agoonoree - Japan

Dear Colleagues,

Greetings from Manila!

We are pleased to inform you that Scout Association of Japan is organizing the 11th Nippon Agoonoree to be held at Kibougaoka Cultural Park, Shiga Prefecture from 2 – 6 August 2012.

On behalf of the Scout Association of Japan, we are pleased to invite Scouts with special needs, youth assistance Scouts and leaders to this one of a kind event. The Agoonoree will gather 1,000 participants from all over Japan, and anticipate some 100 Scouts and leaders from other countries.

Below are the basic information of the Agoonoree:

Date: 2 - 6 August 2012. Participants are requested to arrive before 1400HRS on 2 August and may depart on 6 August 2012 after 1100HRS.

Venue: Kibougaoka Cultural Park, Shiga Prefecture

Theme: We can!

Fee: Agoonoree Fee is JPY 29,800- Japanese Yen (approx. US\$430.00 as of January 2012) per person, which covers rations for 12 meals starting from dinner on 2 August and programmes during the camp.

Eligibility: Agoonoree programme is designed for Scouts with special needs and youth assistance Scouts aged 12-18.

Climate: Generally fair (22-31 degrees Celsius) with some rains.

Equipment: Participants should bring personal camping equipment including sleeping bag, rain-wear, swimming trunks, eating kit and flashlight.

Please note that troop camping equipment including tents will be available for hire. Accommodation at HQ building is also available in case it is necessary for the special needs of your Scouts.

For more inquiries, please contact:

Mr. Toshihito Yoshida

National Secretary
Scout Association of Japan
Hongo 1-34-3, Bunkyo-ku
Tokyo 113-0033 JAPAN
Tel No: +81-3-5805-2561
Fax No: +81-3-3830-3678
Email: saj@scout.or.jp
Website: www.scout.or.jp

If you are interested to send participants to this event, please return the attached reply Slip (Form 1) not later than 31 March 2012, and the participants personal data form (Form 2) not later than 30 April 2012 to Scout Association of Japan.

Thank you and best regards,



Abdullah Rasheed
Regional Director

Encl: Form 1 Form2

AR/ypc/afc
11.01.2012

11TH NIPPON AGOONOREE
National Camp for the Scouts with special needs (Disabled)
Scout Association of Japan

Shiga Prefecture, Japan
2 – 6 August 2012

REPLY SLIP (FORM I)

To: The National Secretary
Scout Association of Japan
1-34-3, Hongo, Bunkyo-ku,
Tokyo 113-0033 JAPAN
Tel: +81-3-5805-2561
Fax: +81-3-3830-3678
Internet: <http://www.scout.or.jp/>

This reply slip (FORM I)
should be returned us not
later than 31 March 2012

Country : _____.

Scout Association: _____.

- We have an interest to organise a Contingent to the 11th Nippon Agoonoree.

Please send further information to:

(Name) _____.

(Title) _____.

(Postal Address) _____.

_____.

(Tel) _____ (Fax) _____.

(E-mail) _____.

Estimate number of participants:

Scouts/Guides with special needs Male _____ Female _____

Youth Assistantce Scouts/Guides Male _____ Female _____

Leaders Male _____ Female _____

For the accommodation of your contingent,

Tent is OK

Accommodation at HQ building is necessary for special needs Scout

- We regret that we are unable to participate in the 11th Nippon Agoonoree

Date

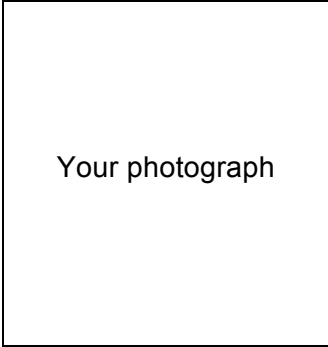
Authorised Signature of National Scout Organization

Name and Title in print

To be returned NOT LATER THAN 30 April 2012
Please write in block or type

11th Nippon Agoonoree, Scout Association of Japan

Personal Data Form (FORM II)



Scout Association: _____.

Country: _____.

Name: _____

· Last/ Family name should be underlined.

Gender: _____ Date of birth: _____ Language(s) Spoken: _____
Day/Month/Year

Passport Nationality: _____ Passport Number: _____.

Postal Address: _____

E-mail Address: _____

Scouting Position: _____

School or Profession:

(Name, grade, field of study title, etc.)

Religion: _____ Dietary Requirements, if any: _____

Physical Condition: _____ Height: _____ cm Weight: _____ kg

Type of Special Needs: _____ **Using wheel-chair / crutches** _____
(if any) (Cross out not applicable)

others (Please specify) _____

Contact in case of emergency:

Name: _____ Phone Number: _____

Postal Address: _____

_____ Date: _____

Signature by Applicant

Recommendation by your National Scout Organization:

Date: _____

_____ Signature of Authorised NSO Official

_____ Name and Position in print

_____ Scout Association