

St. John Ambulance

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Council for Ontario  
**Memorandum**

**TO:** Distribution  
**FROM:** Don Smith  
**DATE:** 20 September 2004  
**RE:** 2004 International Cadet First Aid Competition

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The 2004 International Cadet First Aid Competition will be held at several locations throughout Ontario on Sunday October 24, 2004. The guidelines of the competition, including age criteria are detailed and available online, JUST THE FACTS - October 2003 and all information is posted at [CadetsOnline.ca](http://CadetsOnline.ca).

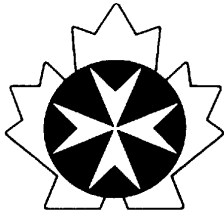
To facilitate planning and confirm locations, all completed entries must be received at Council no later than October 15, 2004. The Intent To Enter form is also attached. Late entries will not be accepted. An Intent To Enter form is required for each team of 4 wishing to compete. These forms may be faxed, mailed or emailed to PHQ. Detailed joining instructions will be forwarded to divisions intending to enter.

To assist you in preparation of your teams, historical scenarios are available online or may be requested from the Community Services office at Council, Telephone 1-800-268-7581, on request. A complete archive of the last nine years of International Cadet First Aid Competition problem sets are available in PDF format online at Cadets Online <http://CadetsOnline.ca>.

This is an excellent opportunity to rally your division to prepare to compete in our Patient Care Competitions next spring and a great introduction for our youngest youth members as this competition has been designed for them and is aimed at Emergency First Aid and not BTS.

Sincerely,

Don Smith  
Email: [dsmith@on.sja.ca](mailto:dsmith@on.sja.ca)



**2004 International Cadet First Aid Competition  
Sunday October 24, 2004**

**INTENT TO ENTER FORM**

TM

To: Community Services  
St. John Council for Ontario  
46 Wellesley Street East  
Toronto, Ontario  
M4Y 1G5  
Fax: 416-923-4856

Name of Unit: \_\_\_\_\_

Name of Team: \_\_\_\_\_

(Clearly indicate the number of Teams or send an application for each team separately)

I have read and agree to abide by the competition guidelines.

Signature of Superintendent/Officer In Charge: \_\_\_\_\_

**Print or type the following information for the person to whom competition  
information should be sent:**

Name of Superintendent / Officer In Charge: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Tel. No. : \_\_\_\_\_ Fax No.: \_\_\_\_\_

Email Address: \_\_\_\_\_

This entry form must be received at Council no later than October 15, 2004. Late entries will not be accepted without written explanation from the Divisional Superintendent.