Hiking Trail at Bras d’Eau National Park, stopover at Roches Noires Cave & Half Day at Bras d’Eau Public Beach

“Nature is not a place to visit. It is a home” - Gary Snyder

The Public Officers’ Welfare Council (POWC) is organising a Hiking Trail at Bras d’Eau National Park on Saturday 18 April 2020 for the benefit of public officers and their families.

2. Bras d’Eau National Park was proclaimed as the second terrestrial National Park of Mauritius on 25th October 2011 and it stands mainly under Mahogany, Araucaria, Tecoma and Eucalyptus plantations. The Park consists of an important thriving population of mangroves, native plant species and also supports a few species of birds amongst which figures “The Coq des Bois” and a habitat of 10 species of butterflies.

3. Bras D’Eau National Park - The Coq de Bois Trail description

- Distance: 2.7 km
- Duration: 1.5 to 2 hours
- Type: Easy
- Equipment: Hiking shoes (compulsory), caps, raincoat, mosquito repellent, sunscreen

4. Programme of the day:

09:00 Arrival at Roches Noires Cave
- Near Health Track
09:15 Visit of Roches Noires Cave (Approx. 200 m)
10:00 Departure from Roches Noires Cave
10:15 Arrival at Bras d’Eau Visitors’ Centre
- Scenery viewing
10:30 Hiking Trail and sightseeing
11:00 Cleaning/planting of trees
12:30 Lunch at Bras d’Eau public beach
13:00 Free time for leisure and fun games
15:30 Departure from Bras d’Eau public beach

5. It is mandatory that participants be physically fit for the hiking trail. The activity is not recommended for children under 05 years. For the visit of the cave, participants should be equipped with lighting equipment/torch. Participants can bring along their swimsuits and enjoy their free time at Bras d’Eau public beach. Kindly note that part of the Bras d’Eau public beach is proclaimed as ‘Dangerous Bathing’ and participants are advised not to venture within such restricted area. The Council has taken all safety measures for the excursion. However, participants will have to bear responsibility of any mishap caused by themselves or accompanying members of their family during the excursion.

6. A nominal fee of Rs. 250 will be charged per participant, which is inclusive of lunch.
7. As a token of courtesy, the POWC will provide free of charge to each participant bottled water (1 litre) and one soft drink.

8. Departure from pick-up points will be as follows:

(a) Curepipe (near Municipality of Curepipe & SBM) 07:30
(b) Trianon (near ex Shoprite) 07:50
(c) Réduit, University of Mauritius (bus parking) 08:00
(d) Port Louis (Government Centre – near Queen Victoria Statue) 08:15
(e) Pamplemousses (parking – SSR Botanical Garden) 08:30

Please note that the buses will leave their respective pick-up points exactly at the time indicated above and will leave Bras d’Eau public beach at 15:30. Participants not availing of transport facilities provided by the Council and latecomers will have to make their own transport arrangements.

9. Public officers interested to join the excursion are requested to fill in the enclosed form at Annex 1 and submit same together with the exact amount to the POWC on the scheduled payment date. Applicants should produce a photocopy of recent pay slip/top part of pay slip indicating the name, pay site code and NIC number or any written evidence/document attesting that the applicant is a serving public officer.

10. Payment will be received on a “first come first served basis” as from Monday 09 March 2020 as from 09:30 to 14:00 at the seat of the Public Officers’ Welfare Council, 6th Floor, ATOM House, 16, Royal Street, Port Louis.

Payment can be effected by bank card, cash or cheque to the order of “Public Officers’ Welfare Council”.

11. No refund will be considered in case of cancellation of participation.

12. The POWC reserves the right to cancel the excursion in case of bad weather or any other unforeseen circumstances. Participants will be refunded accordingly.

13. It would be appreciated if the contents of this letter could be brought to the attention of all the staff of your Ministry/Department. A copy of this circular letter is also reproduced on the Council’s Website: http://powc.govmu.org.

S. Bundhoo
Organising Secretary

Copy to: Presidents of Staff Welfare Associations
**APPLICATION FORM**

Applicant’s Name:*Mr./Mrs./Miss.................................................................

(* Strike as appropriate and SURNAME IN BLOCK LETTERS)

Designation:.................................................................Tel Off.................................................................Fax:.................................

Ministry/Department:.................................................................

Office Address:.................................................................

Tel (Res):.................................................................(Cell):.................................Email Address:.................................

Residential Address:.................................................................

**Pick - up Point (✓) tick as appropriate:**

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|                                                      | Own Transport                |

**Accompanied By:**

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*Every participant will be provided with lunch, one bottle of water (1 litre) and one soft drink.*

**Note:**

(i) Photocopy of recent payslip/top part of payslip indicating the name, pay site code and NIC number or any written evidence/document attesting that the applicant is a public officer in service should be produced when effecting payment.

(ii) All safety measures for the excursion have been taken by the organisers.

(iii) Participants should be physically fit for the hiking. The hiking trail is not recommended under the age of 05 years.

(iv) No refund will be considered in case of cancellation of participation.

(v) Participants should abide to instructions provided on the programme of the day.

(vi) Be assured that all information furnished in the form will be kept confidential.

*I and my family members confirm that we are participating in the Hiking Trail at our own risk. I understand by signing this participation form that neither I and/or my family member cannot enter any representation, or statement, or legal action against the Public Officers’ Welfare Council.*

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<th>Date</th>
<th>Signature of Applicant</th>
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**For office use only**

Amount Paid .......................................................... Receipt No. ...

Payment Effected  Cash: .......................................................... Cheque: ....

by: Bank Card: .......................................................... Cheque No: ....