

Mission Peak District
2021 Camporee

Mission Peak District Golden Gate Area Council



FALL CAMPOREE

Leader's Guide

October 29-31, 2021

Rancho Los Mochos



Mission Peak District
2021 Camporee

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MISSION PEAK DISTRICT 2021 FALL CAMPOREE

Ranchos Los Mochos
October 29-31, 2021

Welcome to the Spooktacular Mission Peak District Fall Camporee!

In addition to the Scout skills competitions that you have come to know and love over the years, this year the fall camporee will include a pumpkin carving contest and a costume contest.

Overview

Location: Rancho Los Mochos Scout Reservation, 18450 Mines Road, Livermore CA, 94550
Check-in: 4:00 PM to 8:00 PM Friday, October 29, 2021. Arrivals after 8:00 PM must be cleared in advance with the camp director.
Check-out: 12:00 Noon Sunday October 31, 2021

Schedule: **Friday Night**
Arrival and Check in.
Campsite selection and setup
SPL Meeting

Saturday
Flags
Pioneering / Knife, Ax, and Fire / Archery / Rifle / Tomahawk
Golden Spoon / Pumpkin Carving / Costume / Campfire

Sunday
Awards
Camp Cleanup and Service
Checkout

See detailed schedule later in this document

Camp Director: Lee Amon
LeeAmon@Pacbell.net

Adult Leaders are encouraged to join the Mission Peak District Adult Scouter Slack Workspace.

Latest information and announcements will be made in the #2021-fall-mpd-district-camporee channel
https://join.slack.com/t/missionpeakdi-o4i5892/shared_invite/zt-me957ndv-T_AcMWL3RGUhgbg~xwHsGA

Arrival and Check-in

Covid Screening

- All vehicles must stop at the stop sign near the ranger's house.
- ALL occupants of the vehicle MUST be able to present proof of vaccine or negative test within previous three days. This will apply to EVERYONE in the vehicle, whether they are staying or not.
- All occupants the vehicle will have their temperature taken.
- If ANYONE in the vehicle is unable to provide proof of vaccine or negative test, or has a temperature of 100° or higher, the entire car will be turned around and sent home
- If No one is available to perform covid check please send ONE adult to administration.
- All occupants of the vehicle should have completed the Covid screening form, <https://filestore.scouting.org/filestore/HealthSafety/pdf/680-057.pdf>

Troop Check-in

Upon Arrival, the SPL and the Scoutmaster should proceed to administration and check in with the following:

- The total number of webelos, scouts, and adults camping.
- A check for any balance owed
- Medical forms A and B for every person staying
- Location of Campsite
- The number and names of patrols that will be competing.

Campsite Selection

Troops can camp at any available campsite at Blue Oak or Manzanita Flats on a first come, first served basis. If you do not know the location of your campsite when you check in, please make sure to update the camp director as soon as you know.

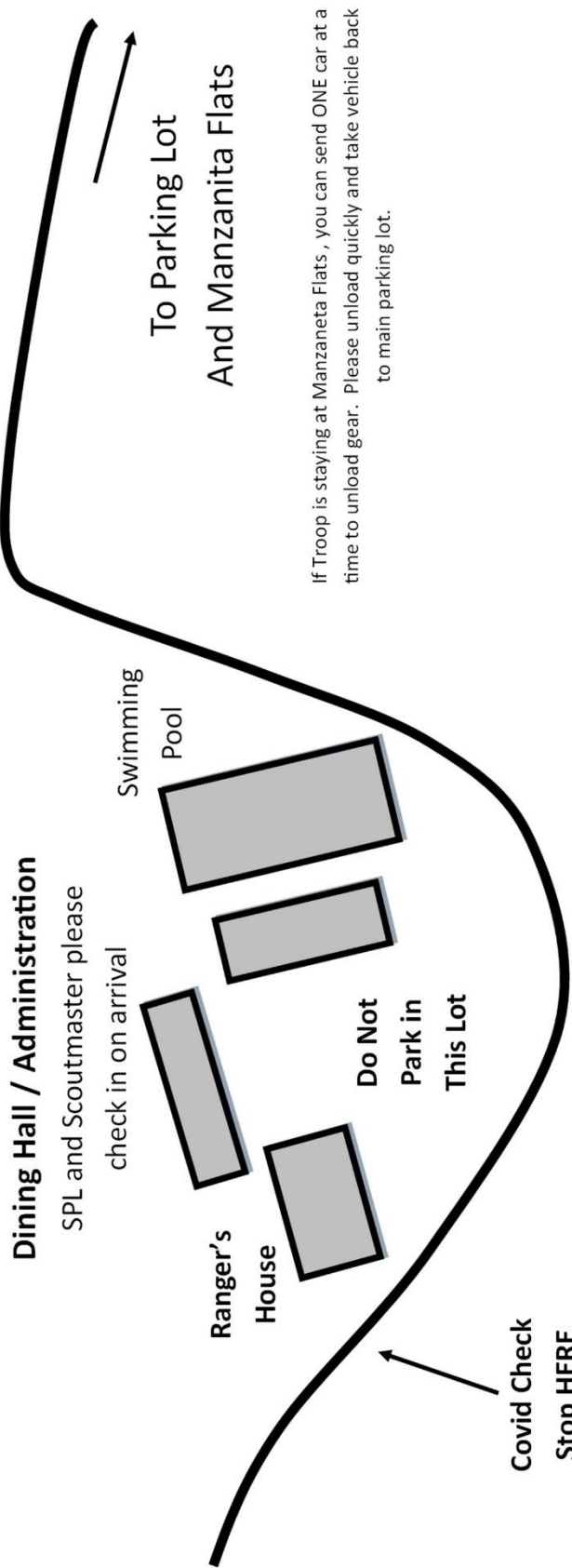
Parking

- Park vehicles starting at the edge of the parade field.
- Back into parking spots.
- Do not leave vehicles unattended at the Manzanita Flat loop.
- Only one vehicle at a time per troop will be allowed up the Manzanita loop - others from the troop will be stopped at the main parking lot.
- Do not block traffic at Blue Oak campsites in front of the RLM main office.
- Do not park in front of the RLM main office

SPL Meeting - Friday, 8:30

- All units need to be represented at the SPL meeting on Friday Night. A great deal of information will be shared during the meeting, and troops will ask to sign up for clean up / service duties
- SPL, ASPLs, and one Scoutmaster from each unit is welcomed.

Arrival and Check-in



If Troop is staying at Manzaneta Flats , you can send ONE car at a time to unload gear. Please unload quickly and take vehicle back to main parking lot.

If no one is there to perform covid check, send ONE adult to Admin

If Troop is staying at Blue Oak, you can unload gear here before proceeding to parking lot. Please be courteous and leave enough room for other vehicles to pass

Covid Restrictions and Guidelines

- All occupants of all arriving vehicles will need to present proof of vaccination or negative test within three days.
- All occupants of all arriving vehicles will need to fill out a covid pre event medical screening
- All occupants of all vehicles will be screened for temperature
- No more than 3 households in any one vehicle
- No more than 2 scouts per tent unless scouts are part of the same household
- Unvaccinated participants sharing a tent should sleep head to toe.
- Masks will be required at all times when not actively eating or drinking

Safety Reminders:

- BSA policy prohibits passengers in beds of pickup trucks
- Drivers, please maintain safe speed and drive cautiously on camp property, watching out for adults and youth. It may be dark when you arrive, so take extra care
- Follow manufacturer's safe storage instructions when using liquid or propane fuel for cooking or illumination.
- Keep an appropriate fire extinguisher rated for flammable liquids accessible in your campsite.
- "NO FLAMES IN TENTS!"
- Units should take care of minor injuries.

Site Rules:

- Do not cut live trees.
- Do not dig any holes or trenches.
- No fires in campsites. Propane stoves are allowed. Charcoal can be used for the Golden Spoon dutch oven competition in the dining hall area.
- Follow BSA "Leave No Trace" camping guidelines (chapter 7, Boy Scout Handbook, 12th edition).
- Store food properly in patrol boxes and ice chests using bungee cord or other method to secure lid.
- No washing dishes or utensils at camp water spigots. Use three pot method
- Rancho Los Mochos is a GREEN facility, therefore bring mess kits and utensils, no paper or Styrofoam.

***** IMPORTANT *****

Trash that your troop generates must be taken home with you when you leave on Sunday.

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Webelos Participation:

- The Camporee is open to overnight camping by Webelos and AOL Scouts who are sponsored by Scouts-BSA Troop.
- Webelos and AOLs will be subject to the same fee schedule as other Scouts and must register for Camporee through a troop
- A 1:1 Adult to Youth ratio is required for Webelos and AOLs
- Webelos Scouts should attend all activities with their sponsoring unit. Webelos Scouts will be able to participate in Archery, Hawk Throw and other age appropriate activities. They are not allowed to shoot the 22 caliber rifles.

Meals:

- Pasta with sauce and salad will be provided for Saturday night dinner. This is meant to supplement your dutch oven dishes prepared for the golden spoon competition
- There will be a cracker barrel with snacks for the camp after the campfire
- Troops are responsible for all other meals through the weekend.
- Saturday Night Golden Spoon cookoff will take place near the dining hall / administration. One dutch oven main course and one dutch oven dessert will be judged for each competing patrol. See rules for Golden Spoon Competition.
- The troop is responsible for Saturday lunch. It is suggested that scouts carry their lunch with them, so they do not have to go back to their Troop campsite.
 - Recommend that scouts have a lunch that they can carry with them for Saturday so that they do not have to return to campsite during competitions.

What to Bring:

- Roster of participants
- Parts A+B medical forms and copy of medical insurance card for each camper
- U.S. and troop flags
- Troop first aid kit
- Standard troop camping equipment (tents, cooking equipment, etc.)
- Materials for the construction of their troop gateway to campsite and/or other campsite improvements (staves, rope, wood, etc.)
- Items required for Golden Spoon/Dutch Oven cooking (see attached guide)
- One pumpkin per competing patrol
- Pumpkin Carving Tools
- Lantern for Signal Tower
- Extra Masks / Sanitizer / Gloves
- Wood and Tinder for water boiling contest

Uniforms of the Day:

- Scouts BSA Field uniform (Class "A") is required for Saturday Evening Flag Lowering Assembly and Sunday Morning Flag and Award Assemblies
- Troop activity uniforms (Class "B") should be worn during all other Camporee events and the Saturday morning Flag Raising Assembly

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Schedule of Events

Friday, 29 October	Sunrise – 7:29AM Sunset – 6:13pm
5:00pm	Unit check-in and set up
8:30 pm	SM/SPL/ASPL/Staff Cracker Barrel at HQ
11:00 pm	Taps
Saturday, 30 October	Sunrise – 7:30 AM Sunset – 6:12pm
07:00 am	Reveille
07:00 – 08:15 am	<i>Breakfast with unit</i>
08:15 – 08:29 am	Troops muster at parade field. Activity Uniform (Class B)
08:30 – 08:45 am	Flag raising ceremony
09:00 am – 3:30 pm	Field Activities and Competition - you will be given time instructions @ Friday Night SPL Meeting (Pack your <i>Lunch</i>)
12:00 – 12:30 pm	Rifle range closed for lunch
2:00 - 3:30 pm	Zombie Launch
3:00 – 6:15 pm	Preparation time for dutch oven cooking as needed.
3:30 – 6:15 pm	Troops can start constructing towers at soccer field & move.
5:30 - 6:15 pm	QM/SPL meet at tower to attach lantern and troop display.
6:15 – 6:30 pm	Flag lowering ceremony and announcements
6:30 – 7:30 pm	<i>Dutch Oven Dinner and Tasting at Teel Courtyard</i> – see instructions for this event It corresponds with Golden Spoon (Class B)
7:30 – 8:15 pm	Troop site and cooking area cleanup
8:15 – 8:30 pm	Troops muster at Campfire Bowl
8:30 – 9:30 pm	Campfire program (Class B)
9:30 – 10:00 pm	Camp cracker barrel
11:00 pm	Taps
Sunday, 31 October	Sunrise – 7:31 AM Sunset – 6:11PM
07:00 am	Reveille
07:00 – 08:15 am	<i>Breakfast with unit</i>
08:15 – 08:29 am	Troops muster at parade field (Class A)
08:30 – 08:45 am	Flag raising ceremony
08:45 – 09:15 am	Vespers Service
09:15 – 09:45 am	Awards Ceremony
09:45 – 10:00 am	Flag lowering ceremony/final announcements
10:00 – 11:00 am	Camp cleanup (service patrols – Kitchen, Shower house w/Adult) (Class B)
11:00 – 12:00 am	Check out

PROGRAM

Shooting Sports

As there are a limited number of stations for archery and rifle, troops will be allocated a number of slots based on proportion of the total number of youth attending. Troops can sign up for specific time slots at the SPL Meeting Friday night.

Archery

Up to 5 members of a patrol can shoot 5 practice arrows and 5 scored arrows. Should a patrol have less than 5 members, then the scores will be averaged to represent a 5 member patrol. For the tie breaker, we will be counting the number of 9/10 arrows.

Rifle

Up to 8 members of a patrol can shoot for score. Should a patrol have less than 8 members, then the scores will be averaged to represent an 8 member patrol. Each scout will get a total of eight shots. The first two or three shots will be for sighting in their firearm (using target "SightingInTarget"). The next five shots are for their final score (using target "Alien Peace Target") If the scout only uses two shots, to sight in his rifle, they can use the third round for a bonus shot on the "Alien Peace Target." The total possible points would be 35 points per scout or 280 for a patrol..

Hawk Throw

Objective: Demonstrate ability to sink a hawk into its target wood.

Using the hawks provided, and standing in the designated hawk range area, sink as many of the hawks as you can. You get 4 throws that count and up to 2 practice throws that do not count. Up to 9 per patrol may participate, and patrols will be ranked by percentage of throws that stick

Pioneering

Brian Tudor will be the adult in charge of the pioneering program, if there are any questions you may email him at betudor@sbcglobal.net.

Goal: Inter-patrol competition based on the Pioneering merit badge requirements. Basic Scout skills, readiness, and knowledge tested at each event.

Note: First aid requirements, Requirement 1, are expressly excluded from this Competition.

Approach:

1. Each troop to provide a display and scored game for each aspect of the badge
2. Each troop to evaluate supportive teamwork during their event as part of Scout spirit
3. Program director will provide skills, readiness, and knowledge questions for each event.

Do not damage live trees during the events!

“Knot Master” Contest:

Individual. Each troop will send their knot specialist to the competition. Scouts will be asked to identify and tie a variety of knots. Winner is Scout who can tie and identify the most knots correctly in a specified time period. Only one scout per unit may participate

KNOT TYING RELAY

Objective: Scouts will tie all First Class knots successfully. (Square Knot, Two Half Hitches, Taut-Line Hitch, Sheet Bend, Bowline, Clove Hitch)

Scoring: This is a timed event, score is dependent on the time it takes the Patrol to finish all the knots. Each member of the Patrol will participate.

ROPE TOSS and ID

Objective: Accurately throw a 40-foot rope. Game is based on throwing accuracy, each member tosses a 40-foot rope once. Closest distance to the target is scored for the Patrol. Also Identify Rope types. Score 1 point for each rope identified.

ANCHORS: H-TRESTLE ANCHORING

Objective: Demonstrate the holding power of the 1-1-1 anchoring systems.

Game is a timed event to hold an H-trestle square and plumb using 4 ropes and 4 1-1-1 anchors. The H-trestle is pre-made and acts as a ladder for the patrol to go up and over. Tension for the trestle will be provided by the 4 ropes. Know your Knots!

LOG DRAG and BLOCK & TACKLE LIFT

Objective: Using a Timber Hitch, drag a 6-foot long, 6-inch diameter log 100 feet and lift the log using block and tackle techniques. Log must be lifted completely off the ground and held for 5 seconds. Game is a timed event.

TRESTLE: A-TRESTLE RACE

Objective: Build an A-Trestle

Game is a timed event to build an A-Trestle using a Diagonal Lashing and 2 square lashings and then drag it with the butt ends of two A frame spars touching the ground with a Scout riding it (like a chariot racer).

PIONEERING PROJECT: Signal Towers Construction

Objective: Each Patrol builds a 14-foot tall signal tower using lashings and spars.

Creativity for the Signal tower using Patrol Flags, Lights, etc... is encouraged.

Game is a judged event. These towers will be used as part of the campfire festivities, so need to be transported to the campfire area.

ZOMBIE LAUNCH

Objective: Using cardboard such as the type that hold appliances make a life size cutout of your Zombie. Then folding the cutout up and taping it you will launch it as far as possible using a large 3 person slingshot. The troop needs to figure out the best launch angle to have the Zombie fly the farthest as the farthest launched Zombie gets the most points.

Additional points will be available for zombie creativity

GOLDEN AXE

Objective:

Demonstrate Totin' Chip, Firem'n Chit, and fire starting abilities. Up to two patrols will be competing at the same time. Totin' Chip and Firem'n Chit is required. Remember a scout is "Trustworthy".

Each area will have one judge plus several assistants. In no case will a judge evaluate his or her own troop. Also, if there are any known rivalries between troops, evaluation by rival troop judges is not permitted.

Axemanship

Objective: Each scout will demonstrate ax safety and technique in splitting firewood.

1. Properly enter an ax yard, pick up an ax, and:
 - a. Split a piece of firewood
 - b. Pass the axe correctly to the next person in line upon exiting the axe yard.
2. While the event is time limited, safety, ability to follow directions, Scout Spirit, and completing the task is weighed higher.
3. One Scout will serve as a yard spotter and will be asked the duties of the spotter.
4. Scoring: Scouts are based on their ability to properly and safely split the log.

Boil Water

Objective: Demonstrate fire safety, fire laying and lighting techniques and then boil one cup of water above the fire.

1. Bring from home any wood and tender you may need for starting your fire, including enough to be able to boil the water. No chemicals or accelerants of any type may be on/in the wood.
2. Lay a small cooking fire using only wood or tender that you have provided.
3. Light it using matches (maximum 3) provided to the patrol and bring your supplied 1 cup of water to a boil. If you can light the fire using no matches you will be awarded extra points.
4. This is a timed event and time limited (Time to bring water to a boil or called because a maximum time is exceeded). If a patrol runs out of matches, then you can ask the judge for additional matches but it will cost you extra time (20 seconds per match) added to your total event time.
5. This event is also judged on safety and scout spirit. An entire patrol may participate within safety guidelines.
6. (Any questions on materials, please refer to The Guide to Safe Scouting, pg 35-36)

Golden Spoon

Objective: Scouts will demonstrate their ability to prepare delicious food using dutch ovens.

Rules:

- Each Patrol will prepare one dutch oven main dish and one dutch oven dessert.
- Scouts will present the completed dishes to the judging panel.
- Dishes will be judged based on quality, taste, presentation, and originality
- All judged dishes must be prepared by scouts at camporee
- All judged dishes must be capable of feeding at least 8 people
- Pasta and sauce will be provided by camporee to supplement the awesome dishes created by the scouts

Costume Contest

Objective: Fun

- Campfire will open with a costume contest. Participating Scouts will be judged on Style, Creativity, Scariest, Most Scout-y, Scariest, and best group costume.
- Costumes must be Scout Appropriate

Pumpkin Carving Contest

Objective: Fun

Each Troop Should bring one pumpkin to the camporee along with pumpkin carving tools and decorating supplies. Plastic sheets and garbage bags will be available. Pumpkin Carving to take place starting at 3:30 in the dining all area. Troops will be given an LED tea light to for each pumpkin. Please DO NOT use glitter or other decorations that will be difficult to clean up. Pumpkins will be judged on the basis of creativity, quality, scouting relatedness, and scariness.

Best Campfire Performance

The campfire program director(s) will be announced or voluntold at the SPL Meeting Friday night. Please see the campfire director for campfire program questions or skit ideas. Please have each patrol bring a lantern with their patrol name and Troop number on it to be attached to signal tower.

Scoring: Skits will be judged by the following criteria; creativity, originality, entertainment, inclusiveness and projection.

Best Campsite Inspection:

Please see the inspection score sheet is included in this guide.

Scout Spirit Stick:

Following tradition, Camporee staff will rate the unit with the most Scout Spirit and the winner will be awarded the Spirit Stick.

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Best Overall Unit:

The best overall unit will be determined by combined weight of campsite inspections, participation in Saturday events (troops with multiple patrols will have patrol scores averaged for troop score), and performance in the Golden Axe and Golden Spoon competitions. Additional points will be awarded for proper uniform attire, proper formations, Scout Spirit, and punctuality at assemblies.

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Campsite Inspection Sheet

Troop # _____

Item No	Item description/ Inspection Category	Possible Points	Troop Points
1.	Gateway innovative/made with natural materials	5	
2.	Gateway made w/ correct lashings	3	
3.	Troop flag properly displayed	3	
4.	U.S. flag properly displayed	3	
5.	Duty rosters posted	3	
6.	Menus posted	3	
7.	Camporee schedule posted	3	
8.	Fire circle clear 10 foot radius	3	
9.	Fire out or being monitored	5	
10.	Shovel or fire bucket at or near fire site	3	
11.	Water, sand, or soil on hand to extinguish fire	3	
12.	Enough fuel/firewood available for next meal	3	
13.	Water for cooking/cleaning stored properly	3	
14.	Chemical fuels properly stored and identified	3	
15.	Food properly stored	5	
16.	Cooking area clean and organized	3	
17.	Cooking utensils clean and stored	3	
18.	First aid kit in a central location and visible	5	
19.	Clothes lines and other lines marked for safety	3	
20.	Tents properly pitched	3	
21.	Tents set up in patrol fashion	3	
22.	Tents at least 10 feet from fire circle	3	
23.	Equipment neatly stored	3	
24.	Garbage bag available and in use	3	
25.	No litter in campsite	3	
26.	Wood cutting tools properly stored in axe yard	5	
27.	Useful and creative camp gadgets present	10	
28.	Overall impression of campsite area. BONUS PTS.	10	

TOTAL POINTS (108) _____

Inspector's Signature(s) _____

Forms and Resources

BSA Covid Pre-Event Screening (required for all arrivals whether they are staying or not)

<https://filestore.scouting.org/filestore/HealthSafety/pdf/680-057.pdf>

Medical Forms A and B (required for all participants)

https://filestore.scouting.org/filestore/HealthSafety/pdf/680-001_AB.pdf

GGAC Fire Arms Permission

<https://ggacbsa.org/wp-content/uploads/2021/02/GGAC-Firearms-Permission-2021.pdf>

Guide to Safe Scouting

<https://www.scouting.org/health-and-safety/gss/>

RLM Emergency Number

1-408-897-3266

Mission Peak District Adult Scouter Slack (please join the camporee channel)

https://join.slack.com/t/missionpeakdi-o4i5892/shared_invite/zt-me957ndv-T_AcMWL3RGUhgbg~xwHsGA

Camp Director

Lee Amon

LeeAmon@Pacbell.net

510-468-2868

Parental Firearms Permission Form

Consent for Minor to Use Firearms & Live Ammunition

Golden Gate Area Council

4 Copies are required at Camp

CALIFORNIA RIFLE, SHOTGUN, AND ARCHERY PARENTAL/LEGAL GUARDIAN PERMISSION FORM FOR OLDER SCOUTS (BOYS SCOUTS, ETC.)

I, _____, parent or legal guardian of _____
(Print Name of Parent or Legal Guardian) (Print Name of Child Participating)

hereby give my child express permission and consent to be lent and possess firearms (handguns and long guns) and ammunition to engage in lawful, recreational sport, including target practice, and/or a course of instruction in the safe and lawful use of a handgun. (Cal. Penal Code ** 27945, 29610, 29615, 29650 29655; 18 U.S.C * 922(x)). As used in this form, "firearms" includes any handguns, long guns, or shotguns that may lawfully be loaned to and possessed by a minor under state and federal law. I also give my child express permission and consent to possess, and for a person to loan to my child, a "BB device" as defined in Cal. Penal Code * 16250. (Cal. Penal Code * 19915), bows, arrows, and tomahawks.

(Please mark each applicable category of permission granted, and initial each entry)

Archery (bow and arrow, knife, sling shot, and tomahawk throwing) _____ (initials)
Cub Scouts, Webelos, Scouts BSA, Venturers, Explorers, Sea Scouts

BB Devices (BB gun) _____ (initials)
Cub Scouts, Webelos, Scouts SBA, Venturers, Explorers, Sea Scouts

Air Rifles (pellet gun, air soft) _____ (initials)
Webelos, Scouts BSA, Venturers, Explorers, Sea Scouts only

Long Guns (rifle, shotgun) _____ (initials)
Scouts BSA, Venturers, Explorers, Sea Scouts only

Handguns _____ (initials)
Venturers, Explorers, Sea Scouts only

This consent is valid, absent my express revocation thereof, for the calendar year of _____ (Calendar Year)
A photocopy or facsimile of this written consent will serve as an original.

I represent that I am (1) the parent or legal guardian of the minor named above and (2) not prohibited by Federal, state, or local law from possessing a firearm. I agree to indemnify and hold harmless the Boy Scouts of America, and any local Council and all officers, members, employees, and volunteers thereof, from all losses, damages, causes of action, cost and expenses, arising from any false statements or representations made by me herein.

Please bring four (4) copies of this form to camp with your child. One (1) copy must remain in your child's possession at all times while he or she possesses any firearms or ammunition, and one (1) copy should be provided to the owner of the firearm.

Signature of Parent or Legal Guardian

Date _____

Unit #: _____
Unit Type: _____
Last Name: _____
First Name: _____

Model COVID-19 Pre-Event Medical Screening Checklist

Use this checklist to assist in identifying potential COVID-19 cases before event participation.

Review with each youth and adult participant their current health status, both before departure and upon arrival at the event. **Anyone entering a camp or event – including visitors, vendors, etc. – must be screened.**

Councils should customize with input from their council health supervisor and local health department.

- Yes No Have you or has anyone in your household been in [close contact*](#) in the past 14 days with anyone known or suspected to have COVID-19 or is otherwise sick?
- Yes No Have you or has anyone in your household been in [close contact*](#) with anyone who has been tested for COVID-19 and is waiting for results?
- Yes No Have you or has anyone in your household been sick in the past 14 days, or have you or they been tested for any illness and are waiting for results?
- Yes No Has anyone in your household been exposed to an individual known or suspected to have COVID-19 in the past 14 days?
- Yes No Have you or has anyone you have been in [close contact*](#) with traveled on a cruise ship or internationally or to an area with a known communicable disease outbreak in the past 14 days?

***According to the Centers for Disease Control and Prevention (CDC), “close contact” means:**

- You were within 6 feet of someone who has COVID-19 for a cumulative total of 15 minutes or more over a 24-hour period
- You had direct physical contact with an infected person (hugged or kissed them)
- You shared eating or drinking utensils
- An infected person sneezed, coughed, or otherwise got respiratory droplets on you

If the answer is YES to any one of the five questions above, the participant must stay home.

If all answers above are NO, proceed to the symptoms list below.

Symptoms of COVID-19

*If anyone in your household has **any one** of the following new or worsening signs or symptoms of possible COVID-19, the entire household must stay home.*

- Shortness of breath**
- Cough**
- Fever of 100.0° or greater**
- Flu-like symptoms**
- Repeated shaking with chills**
- Fatigue**
- Muscle or body aches**
- Headache**
- Sore throat**
- Loss of taste or smell**
- Diarrhea**
- Nausea or vomiting**

****Potential Higher-Risk Individuals****

- Yes No Are you in a higher-risk category as defined by the [CDC guidelines](#), including older adults, people with medical conditions, and those with other individual circumstances?

If the answer is “yes,” we recommend that you stay home.

Should you choose to participate, you must have approval from your health care provider.

Part A: Informed Consent, Release Agreement, and Authorization

Full name: _____

Date of birth: _____

High-adventure base participants:

Expedition/crew No.: _____

or staff position: _____

Informed Consent, Release Agreement, and Authorization

I understand that participation in Scouting activities involves the risk of personal injury, including death, due to the physical, mental, and emotional challenges in the activities offered. Information about those activities may be obtained from the venue, activity coordinators, or your local council. I also understand that participation in these activities is entirely voluntary and requires participants to follow instructions and abide by all applicable rules and the standards of conduct.

In case of an emergency involving me or my child, I understand that efforts will be made to contact the individual listed as the emergency contact person by the medical provider and/or adult leader. In the event that this person cannot be reached, permission is hereby given to the medical provider selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for me or my child. Medical providers are authorized to disclose protected health information to the adult in charge, camp medical staff, camp management, and/or any physician or health-care provider involved in providing medical care to the participant. Protected Health Information/Confidential Health Information (PHI/CHI) under the Standards for Privacy of Individually Identifiable Health Information, 45 C.F.R. §§160.103, 164.501, etc. seq., as amended from time to time, includes examination findings, test results, and treatment provided for purposes of medical evaluation of the participant, follow-up and communication with the participant's parents or guardian, and/or determination of the participant's ability to continue in the program activities.

(If applicable) I have carefully considered the risk involved and hereby give my informed consent for my child to participate in all activities offered in the program. I further authorize the sharing of the information on this form with any BSA volunteers or professionals who need to know of medical conditions that may require special consideration in conducting Scouting activities.

With appreciation of the dangers and risks associated with programs and activities, on my own behalf and/or on behalf of my child, I hereby fully and completely release and waive any and all claims for personal injury, death, or loss that may arise against the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with any program or activity.

I also hereby assign and grant to the local council and the Boy Scouts of America, as well as their authorized representatives, the right and permission to use and publish the photographs/film/videotapes/electronic representations and/or sound recordings made of me or my child at all Scouting activities, and I hereby release the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity from any and all liability from such use and publication. I further authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage, and/or distribution of said photographs/film/videotapes/electronic representations and/or sound recordings without limitation at the discretion of the BSA, and I specifically waive any right to any compensation I may have for any of the foregoing.

Every person who furnishes any BB device to any minor, without the express or implied permission of the parent or legal guardian of the minor, is guilty of a misdemeanor. (California Penal Code Section 19915[a]) My signature below on this form indicates my permission.

I give permission for my child to use a BB device. (Note: Not all events will include BB devices.)

Checking this box indicates you DO NOT want your child to use a BB device.



NOTE: Due to the nature of programs and activities, the Boy Scouts of America and local councils cannot continually monitor compliance of program participants or any limitations imposed upon them by parents or medical providers. However, so that leaders can be as familiar as possible with any limitations, list any restrictions imposed on a child participant in connection with programs or activities below.

List participant restrictions, if any:

None

I understand that, if any information I/we have provided is found to be inaccurate, it may limit and/or eliminate the opportunity for participation in any event or activity. If I am participating at Philmont Scout Ranch, Philmont Training Center, Northern Tier, Sea Base, or the Summit Bechtel Reserve, **I have also read and understand the supplemental risk advisories, including height and weight requirements and restrictions, and understand that the participant will not be allowed to participate in applicable high-adventure programs if those requirements are not met.** The participant has permission to engage in all high-adventure activities described, except as specifically noted by me or the health-care provider. If the participant is under the age of 18, a parent or guardian's signature is required.

Participant's signature: _____ Date: _____

Parent/guardian signature for youth: _____ Date: _____

(If participant is under the age of 18)

Complete this section for youth participants only:

Adults Authorized to Take Youth to and From Events:

You must designate at least one adult. Please include a phone number.

Name: _____

Name: _____

Phone: _____

Phone: _____

Adults **NOT** Authorized to Take Youth to and From Events:

Name: _____

Name: _____

Phone: _____

Phone: _____



Part B1: General Information/Health History

Full name: _____

Date of birth: _____

High-adventure base participants:

Expedition/crew No.: _____

or staff position: _____

Age: _____ Gender: _____ Height (inches): _____ Weight (lbs.): _____

Address: _____

City: _____ State: _____ ZIP code: _____ Phone: _____

Unit leader: _____ Unit leader's mobile #: _____

Council Name/No.: _____ Unit No.: _____

Health/Accident Insurance Company: _____ Policy No.: _____



Please attach a photocopy of both sides of the insurance card. If you do not have medical insurance, enter "none" above.

In case of emergency, notify the person below:

Name: _____ Relationship: _____

Address: _____ Home phone: _____ Other phone: _____

Alternate contact name: _____ Alternate's phone: _____

Health History

Do you currently have or have you ever been treated for any of the following?

Yes	No	Condition	Explain
		Diabetes	Last HbA1c percentage and date: _____ Insulin pump: Yes <input type="checkbox"/> No <input type="checkbox"/>
		Hypertension (high blood pressure)	
		Adult or congenital heart disease/heart attack/chest pain (anginal)/heart murmur/coronary artery disease. Any heart surgery or procedure. Explain all "yes" answers.	
		Family history of heart disease or any sudden heart-related death of a family member before age 50.	
		Stroke/TIA	
		Asthma/reactive airway disease	Last attack date: _____
		Lung/respiratory disease	
		COPD	
		Ear/eyes/nose/sinus problems	
		Muscular/skeletal condition/muscle or bone issues	
		Head injury/concussion/TBI	
		Altitude sickness	
		Psychiatric/psychological or emotional difficulties	
		Neurological/behavioral disorders	
		Blood disorders/sickle cell disease	
		Fainting spells and dizziness	
		Kidney disease	
		Seizures or epilepsy	Last seizure date: _____
		Abdominal/stomach/digestive problems	
		Thyroid disease	
		Skin issues	
		Obstructive sleep apnea/sleep disorders	CPAP: Yes <input type="checkbox"/> No <input type="checkbox"/>
		List all surgeries and hospitalizations	Last surgery date: _____
		List any other medical conditions not covered above	



Part B2: General Information/Health History

Full name: _____

Date of birth: _____

High-adventure base participants:

Expedition/crew No.: _____

or staff position: _____

Allergies/Medications

DO YOU USE AN EPINEPHRINE AUTOINJECTOR? Exp. date (if yes) _____ YES NO

DO YOU USE AN ASTHMA RESCUE INHALER? Exp. date (if yes) _____ YES NO

Are you allergic to or do you have any adverse reaction to any of the following?

Yes	No	Allergies or Reactions	Explain	Yes	No	Allergies or Reactions	Explain
		Medication				Plants	
		Food				Insect bites/stings	

List all medications currently used, including any over-the-counter medications.

Check here if no medications are routinely taken. If additional space is needed, please list on a separate sheet and attach.

Medication	Dose	Frequency	Reason

YES NO Non-prescription medication administration is authorized with these exceptions: _____

Administration of the above medications is approved for youth by:

_____/_____
 Parent/guardian signature MD/DO, NP, or PA signature (if your state requires signature)

Bring enough medications in sufficient quantities and in the original containers. Make sure that they are NOT expired, including inhalers and EpiPens. You SHOULD NOT STOP taking any maintenance medication unless instructed to do so by your doctor.

Immunization

The following immunizations are recommended. Tetanus immunization is required and must have been received within the last 10 years. If you had the disease, check the disease column and list the date. If immunized, check yes and provide the year received.

Yes	No	Had Disease	Immunization	Date(s)
			Tetanus	
			Pertussis	
			Diphtheria	
			Measles/mumps/rubella	
			Polio	
			Chicken Pox	
			Hepatitis A	
			Hepatitis B	
			Meningitis	
			Influenza	
			Other (i.e., HIB)	
			Exemption to immunizations (form required)	

Please list any additional information about your medical history:

DO NOT WRITE IN THIS BOX.
 Review for camp or special activity.

Reviewed by: _____

Date: _____

Further approval required: Yes No

Reason: _____

Approved by: _____

Date: _____

