

BOY SCOUTS OF AMERICA - TROOP 805

ACTIVITY INFORMATION FORM

Meridian District Camporee – April 28 - 30 2017

OSPL: TBD

- What:** Meridian District Camporee
- When:** Friday April 28th to Sunday, April 30th 2017
- Cost:** \$60 for Scouts and Adults; includes 4 scout meals; no refunds
- Meet:** Sycamore Park and Ride – Departing @ 4:30pm Sharp
- Return:** Scouts will return to Sycamore Park and Ride Sunday at approximately 1p or 2p. Scouts will call ahead with actual pickup time or if running late.
- Uniform:** T805 Class A & B hiking or other synthetic wicking shirt.
- Details:** All Scouts must be in full Class A uniform and will be inspected at check-in. Inspectors will look for patrol flags, patrol patches and uniformity of dress. Uniforms will be required throughout the weekend, except during the day on Saturday. Camporee T-shirts will be issued upon our arrival at camp. All other clothing, including hats, must either have a scouting logo or plain. No team, insignia or camouflage clothing.
- Patrols will need to plan menus for Saturday Breakfast, Lunch & Dinner and Sunday Breakfast. Breakfasts are suggested as cold meals for the short time available. Cooking will be done on standard gas stoves for Saturday Dinner. Bring a BAG DINNER for Friday evening and snacks for Saturday to supplement lunch.
- * Signed [BSA Medical A&B Forms](#) required**
- ** Signed [MDSC Firearms permission slip](#) required for Shooting Sports activities**
- Adults:** We are asked to provide adults to assist on staff; please contact either Ray w/questions
- Questions:** Mr. Benveniste Cell 415-646-6739 / dan@Benveniste.us or
Ray Chan: cell 925-548-6179 / ray4scouting@gmail.com

Return the permission slips and Medical A&B forms and checks to your Patrol Leader.

*Patrol Leaders submit the collected slips, money to the outing folder no later than the Troop Meeting on
Tuesday, March 21st 2017*

BOY SCOUTS OF AMERICA - TROOP 805
INFORMED CONSENT, RELEASE AND PERMISSION TO TREAT

Meridian District Camporee – April 28-30, 2017

I hereby give permission for my son, _____, to attend this outing with Boy Scout Troop 805. I understand that participation in Scouting activities involves a certain degree of risk and can be physically, mentally, and emotionally demanding. I have carefully considered the risk involved and have given consent for myself or my child to participate in this activity. I also understand that participation in this activity is entirely voluntary and requires participants to abide by applicable rules and standards of conduct. I release the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, participants, related parties, or other organizations associated with the activity from any and all claims or liability arising out of this participation.

If this activity involves archery or firearms, I hereby give express consent for a qualified range instructor to furnish BSA-approved archery or firearm equipment to the participant for the purpose of instruction in the safe handling and use of such equipment and related activities at designated ranges.

I hereby give permission for the adult leaders to give over-the-counter (OTC) medicines as needed (e.g. Aleve for headache, fever, inflammation, pain; Benadryl for allergic reactions, nasal allergies, hives and itching; Lomotil for diarrhea; etc.) In case of emergency involving my child, I understand every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the medical provider selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child. Medical providers are authorized to disclose to the adult in charge 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. (All reasonable measures will be taken to safeguard the health and safety of the Troop's members.)

Name of Parent or Guardian (please print): _____

Signature: _____ **Date:** _____

Home Phone: _____ **Cell Phone:** _____

If I cannot be reached in the event of an emergency, please notify the person named below:

Name: _____ **Cell Phone:** _____

The following information relates to my son:

Physician's Name: _____ **Phone:** _____

Insurance Company: _____ **Policy No:** _____

Allergies or pertinent medical information (incl. Rx & OTC meds): _____

Tour Plan Information

Drive? (Check if Yes)	Vehicle Year / Make / Model	No. of Passengers	Driver's License / Name / Cell Phone	Auto Insurance (Min.: \$50K/\$100K/\$50K)
<input type="checkbox"/> To:				
<input type="checkbox"/> From:				

(Reminder: Parents are requested to provide Troop transportation on at least two outings per year.)

WE NEED AT LEAST ONE MORE ADULTs TO PARTICIPATE TO MEET BSA REQUIREMENTS.

REGISTERED LEADERS: Will you be participating with the troop? Yes: Name: _____

Youth Protection Trained? Yes: YP expiration date: _____

Parental Firearm Permission Form

Consent for Minor to Use Firearms & Live Ammunition

Mt. Diablo Silverado Council

The State of California has enacted legislation that prohibits any person from furnishing, loaning, or otherwise providing a minor any firearm or live ammunition without the express permission of his or her parent or legal guardian. **Your son/daughter will not be allowed on any shooting range without this signed release. It is necessary for you to give consent for your child to participate in the shooting sports activities.** This permission includes archery where applicable at the event or camp.

By signing this consent form I do hereby give the minor named below permission as required by California Penal Code Sections 12552, 12070, 12072, 12078, et. Seq. to the Mt. Diablo Silverado Council, Boy Scouts of America, and to instructors established by the Boy Scouts of America (National), to furnish a firearm, BB Gun/air rifle, .22 rifle, shotgun, Muzzleloading rifle, Muzzleloading Shotgun, Muzzleloading Pistol or handgun (**Venture and Sea Scout only**), bow, and ammunition and/or arrows to said minor for the purposes of instructing him/her in the safe handling of firearms, safe shooting, and marksmanship. Approved Instructors include Certified Instructors and Range Safety Officers of the National Rifle Association, National Archery Association Level 1 Certification or better. Instructors are meant to also include BSA certified archery instructors and adults Certified as BB Gun/air rifle Rangemasters. Firearms authorized for Venture/Sea Scouts are specified in the Guide to Safe Scouting. All guidelines of the Guide to Safe Scouting will be followed.

I do further agree to indemnify and hold harmless the Mt. Diablo Silverado Council, Boy Scouts of America, and all officers, members, employees, and volunteers thereof, from all suits or actions brought for, or on account of, any injuries or damages received or sustained by any person or persons by or from the consequences of any negligence or any act or omission of the above named minor occurring during the course of said instruction.

Participant's printed name _____ Unit # _____

Participant's Age: _____ Date(s) of camp/event: _____

Parent/Guardian's Printed Name: _____ Date: _____

Signature: _____ Relationship: _____

Primary Phone# () _____

Alternate Phone # () _____