



**Parent/guardian needs to fill out the last page and return it to Patrol Scribe no later than:  
 April 28<sup>th</sup>, 2009**

**Event:** 7 Ranges – Good Turn weekend

**Destination:** 7070 Meter Rd NE, Kensington, OH 44427

**Meet at:** COTL – Friday @ 6:30 PM – There will be a light snack once we arrive. Scouts need to eat dinner prior to arrival.

**Return to:** Jackson Middle School – West Parking Lot (between JMMS and Sauder) – Sunday @ 12:00 PM

**Fees:** Camp Fees – Scout - \$3.00 – Adult - \$3.00  
 Each Patrol will collect \$12.00 for food (see below)  
 Total camp fees Scout - \$15.00 – Adult - \$15.00

**Personal Equipment Needed:** Early Spring - Camping Gear  
 Minimum Recommended Personal Gear:

Wear	Backpack		
<b>Clothes appropriate for the weather</b>	Sleeping bag	Ground cloth or small tarp	Sleeping pad
<b>Comfortable shoes</b>	Pillow	Extra Blanket if wanted	Sweat shirt and pants
<b>Bring</b>	Extra Change(s) of clothes	Three pair extra socks (at least)	Mess Kit - Cup/Canteen - Utensils
<b>Boots and work gloves</b>	Flashlight	Pocket Knife and Toten Chit	Hat
<b>Dinner for Friday night</b>	Toothbrush and paste	Toiletries	Soap and Washcloth
<b>Loppers or pruners</b>	Sunscreen	Bug Spray	Fireman Chit

**Leader in Charge:** Brian Paisley home: 330.529.4013 cell: 330.284.1949 (availability subject to cell coverage in area).

**Activity Notes/Itinerary:** This weekend is primarily a work weekend for the scouts Pipestone “Good Turn” requirement. Each scout MUST complete a good turn as one of the requirements for their pipestone honor award during summer camp. If your scout is unable to attend please contact me for alternate arrangements. We will be sawing up a dead tree in the Ottawa campsite area. We will also be cutting multi-flora rosebush and grape vine in the same area.

Scouts will have the opportunity to complete the following rank requirements during the camp out depending on the amount of time they spend as well as **their** effort to complete the requirements.

Tenderfoot – 1, 2, 3, 4a, 4b

Second Class – 2b, 2f

First Class – 4a, 4b, 4c, 4d, 4e, 7a, 7b, 7c

**Patrol Meals** – Patrols will plan their own meals for this campout. They will assign a Grubmaster as well as create and follow a patrol duty roster. Patrols will collect \$12.00 per scout. The Grubmaster will need to stay within the budget for the campout. They will need to plan a Friday night snack, Saturday breakfast, Saturday lunch, Saturday dinner and Sunday breakfast. Each meal they will have 1 – 2 adult leaders eat with their patrol. The patrols will be given a set dollar amount to cover the cost of the adult meals.



**Driving Directions** will be provided at departure



**Troop 921 Activity Permission Slip**

Scout Name: \_\_\_\_\_ Age: \_\_\_\_\_ Patrol: \_\_\_\_\_  
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Adult Name: \_\_\_\_\_

The undersigned parent or guardian agrees to the following:

1. I am the legal parent or guardian of the Scout named above and I am legally able to give my consent for the Scout to participate in this Troop activity and I hereby give consent.
2. I have read, understand, and accept the included Troop 921 Disciplinary Policy and if determined necessary by Troop Leaders, will provide transportation home for my Scout, at any hour.
3. I understand that certain costs are incurred with all Troop activities (food, reservation fees, etc.). If my Scout should decide not to attend or fail to show up at predetermined departure time, he will forfeit any and all fees incurred during the Troop activity unless notification is made at least 1 week prior to the event.
4. My Scout is in good health and has no major illness or change in his health status since the last Personal Health and Medical History form was submitted to the Troop.
5. I have read, understand, and followed the Troop 921 Medication Policies, as applicable.
6. In case of medical emergency, I understand that every effort will be made to contact me. In the event I cannot be reached, I give my permission to the physician selected by the Troop Leaders to secure proper treatment, including hospitalization or medications for my Scout. (Please list any exceptions.) \_\_\_\_\_
7. My son will make he is present prior to the determined departure time & he will make sure he is properly equipped and clothed for this activity. Upon return, I will pick him up on time at the location determined.
8. I will work with the Troop Transportation Chair to make sure an adequate amount of drivers and adults will be available to provide transportation for all Troop members. I will do my share by pitching in and contributing to the transportation needs of this Troop.
9. I will accept that the adult leaders of this activity will be acting in the best interest of the Scouts of Troop 921 in accordance with BSA Safe Scouting Guidelines. I agree to hold them harmless for any attempts to do what is in any and all of the participants' best interest.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I am able to assist driving  to  from  both directions

Emergency Contacts: Please provide at least two emergency contacts:

Primary Contact Adult: \_\_\_\_\_ Phone Number: \_\_\_\_\_

First Alternate Adult: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Second Alternate: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Total camp fees of \$ \_\_\_\_\_

Cash payment of \$ \_\_\_\_\_

Check Payment of \$ \_\_\_\_\_ Check number # \_\_\_\_\_ (payable to Troop 921)

Deduct Payment of \$ \_\_\_\_\_ from Scout account Parent initials: \_\_\_\_\_

Received by (Troop Scribe/Leader initials): \_\_\_\_\_ Date: \_\_\_\_\_