OUTING NAME:	NAM	ſE:
TROOP 648:	PLANNING CHE	CCKLIST
 Keep this checklist 	EET WITH THE ADULT t for the PLC meeting(s) list so you know your respon	ADVISOR AND:
 STEP 2:WRITE DOWN COSTS AND EMERGE 	EVENT DETAILS, ACTI NCY/SAFTEY INFORMA	
Date of Event: Location:		
Event Description: (Base	e camp, backpacking, etc.)	Is it a "family camp?" Yes No
Requirements to Attenda	(Merit badges, ages, etc)	I ES NO
Planned Activities: (Last	page in packet)	
THE FOLLOWING IN THE DATE OF THE OUTI	. –	5 WEEKS PRIOR TO
ADULT, SPL AND/OR APRIOR TO THE DATE OF DATE:		E DONE 8 WEEKS
1st boy in charge Name:	Phone	email
2nd boy in charge Name:	Phone	email
3rd boy in charge Name:	Phone	_ email
4th boy in charge Name:	Phone	emaıl

ADUT LEADERS: 2 TRAINED ADULTS OVER THE AGE OF 21 *MUST*

1. Name: Phone Email Driving Y N # of Seats in car Pull Trailer Y N

2. Name: Phone Email Driving Y N # of Seats in car Pull Trailer Y N

3. Name: Phone Email Driving Y N # of Seats in car Pull Trailer Y N

Any Complications:

Any Complications:

OUTING NAME:		NAN	ME:
Any Complications: 4 Name:	Phone	Emaï	I
4. Name: Driving Y N # of Seats Any Complications:	in car	Pull Trailer Y N	
5. Name: Driving Y N # of Seats	Phone	Emai	1
Any Complications:			N
How many scouts are attending How many Seats are there	ng	-	
Are there enough seats? NO of If No then check your math a Patrol Leader. If Yes good work!!!!!	ind immedi	·	, G
THE FOLLOWING <u>MUST</u>	BE DONI	E 13 WEEKS PR	
DEPARTURE: Place:			RETURN: Place:
Time:			Time:
Date:			Date:
EMERGENCY CONTACT NU Name: Pho	JMBER (N one:	Aust be an adult	who is <u>NOT</u> attending)
Emergency contact adults Signs	ature:		
ARE THE FOLLOWING NEE		,	
BSA Local Tour Permit 2 Weeks Other Permits: LIST THEM	in advance	e (ask Mr.Kuni)	
Reservations (Mostly group sites))	-	By By
SPECIAL Permission slips	,		By
UNIFORM: For travel: Class A	A	During o	uting: Class B
FEES:	G' 1	T 11 1 1/D	1/0
Food Money	-	e: Individual/Patr	ol/Troop
Gas Money Camp Fee			
T . T			
Entrance Fee Extra Fees			
Fri Dinner			
Total Per scout	-		

OUTING N.	AME:	NAME:	
EQUIDME		DONE O WEEK	C DDIOD TO THE EVENT
-	pment like Radios, PFD's, Ro		S PRIOR TO THE EVENT
TROOP FIR kit needed)	ST AID KIT (<u>MUST</u> go on a	all outings except	tion of Backpacking but smaller
,	e Kit	Who is in cha	arge of the Kit
	EDICAL RECORDS (<u>MUST</u> em		NO EXCEPTIONS)
What is it	Where is it/Who has it	How many	Reason why you need it
DATE TA		•	
ups	_(1 Months Prior) Get sign	up sheet and ke	ep up to date with the sign
www.bsatro	_ (1 Month Prior) Post Ani oop648.org	nouncement on t	croop website
	_ (2 Months Prior) Make a	nnouncements a	t Troop Weekly Meeting
	(2 Months Prior) Make a	a Flyer that is ap	proved by the PLC
STEP 4: Sig	gn-up Sheet		
Finnega o get men o Call boy	prior) Get sign up sheet man, Mr. Cole, the SPL and And Paus planned and have a list on who aren't on your list to tately call their grub master	SPL of outings of the buyers of to see if they are g	food/Grub master

OUTING NAME:	NAME:
o Get drivers FINALIZED AND CO	ONFIRMED (Tuesday before)
Step 5 : Questions that NEED answerin	ng
Are you taking the trailer and if so wh	no is pulling the Trailer?
How many adults are going?	
How many scout do you have going?_	
How many total seats do you have?	
Do you have enough seats for every significant adults?	gned up scout plus a few extra and
Are you going? YES	
Are fires allowed?	
Temperature range of the outing locat	tion?Fahrenheit
Possibility of rain	
Yes Maybe NO	
Is their a reliable water source?	
Are there restrooms?	
EXTRA QUESTIONS FOR BACKPA	ACKING AND HIGH ADVENTURE
How long is the Trail?Miles	
Elevation Gain? Feet	
YES or NO	
Difficulty: 1-being easy, 5-being ok, 10)-being REALLY DIFFICULT
The following \underline{MUST} be done 5 weeks	s prior to the event
Once packet is completed you <u>MUST</u> §	get the signature's 4 weeks prior to the event
ADULT ADVISOR'S	
SIGANTURE	
YOUTH OUTING PLANNER	
SIGNATURE	
ASPL OF OUTINGS SIGNATURE _	
OUTDOOR PROGRAM	
COMMITTEE MEMBER'S	
SIGNATURE	(MR.FINNEGAN)
SPL SIGNATURE	
SCOUTMASTER	
CLCNIATUDE	(MR.COLE)

OUTING NAME:	NAME:	_
STEP 5: AFTER OUTING		
The youth leader and the adult advisor Start Stop and Continue	r will do a	
	NAME:	
	NAME OF OUTING: DATE OF OUTING:	_
Start (something we should start doing		_
•	'	
• Stop (something that was bad that we s	should ston doing)	
•	should stop doing)	
	41-4	
Continue (something's that were good	that we should continue doing)	
•		
	NAME:NAME OF OUTING:	_
	DATE OF OUTING:	_ _
Start (something we should start doing	()	
•		
Stop (something that was bad that we s	should stop doing)	
•		
• Continue (something's that were good	that we should continue doing)	
•		