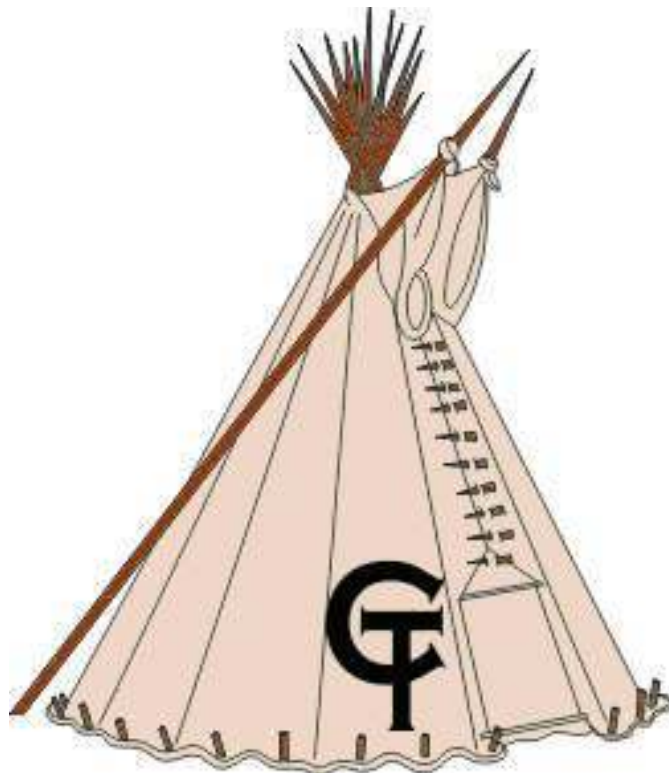


CAMP TRACI

Outdoor Adventure for Girls
Established 2015



2015 LEADERS GUIDE

Welcome to Camp Traci Day Camp!

WHY WE ARE HERE

Camp Traci is a new day camp for pre-teen girls. Using the resources of the 96 year old Camp Tracy. At Boy Scout Camp they learn camping skills, enjoy outdoor adventure and the basic characteristics of good citizenship. We look forward to serving you in our inaugural year.

HOW TO USE THIS GUIDE

This guide is designed to help leaders and parents prepare their girls for the experience. If you have any questions or concerns after reviewing this guide, please call the Camp Desk or Camp Director as listed below.

INFORMATIONAL MEETINGS

*Camp Traci staff will hold three **informational meetings** for leaders and parents. Meetings will begin with a guided tour of Camp Traci, followed by an informative presentation and a question and answer session. Please plan to attend one of the following:*

Tuesday, April 14 - Tours will begin at 6:30 p.m. Presentation and Q&A at 7:00p.m.

Wednesday, April 22 - Tours will begin at 6:30 p.m. Presentation and Q&A at 7:0p.m.

Thursday, April 30 - Tours will begin at 6:30 p.m. Presentation and Q&A at 7:00p.m.

CAMP DIRECTOR

Vincent Bath

Scout Office Phone: 801-582-3663 x221

Cell Phone 801-518-1148

Camp Tracy Phone: 801-272-8668 (June 8 to August 5)

E-mail: Vincent.Bath@Scouting.org

CAMP DESK

The camp desk can assist you with registration needs.

They can be reached at 801-582-3663

The camp desk is open Monday – Friday from 8:30 a.m. to 5:30 p.m.

CAMP SCHEDULE

July 1-2 and 22-23

Check-in	12:30 PM
Opening Ceremony	1:00 PM
Activity Area	1:30 PM
Activity Area	2:15 PM
Activity Area	3:00 PM
Activity Area	3:45 PM
Activity Area	4:30 PM
Activity Area	5:15 PM
Activity Area	6:00 PM
Dinner	6:45 PM
Honor Trail / Campfires	7:30 PM
Depart	8:30 PM

August 3-4

Check-in	8:00 AM
Opening Ceremony	8:30 AM
Activity Area	9:00 AM
Activity Area	9:45 AM
Activity Area	10:30 AM
Activity Area / Lunch 1	11:15 AM
Activity Area / Lunch 2	12:00 PM
Activity Area	12:45 PM
Activity Area	1:30 PM
Activity Area	2:15 PM
Honor Trail / Campfires	3:00 PM
Depart	4:00 PM



Before Camp

DRESS

It is important that participants are properly attired for camp. Prepare for the elements with the following: long sleeved shirts and hats for the sun; sturdy, closed toe shoes for the rough terrain; jackets or sweaters for cool mornings or evenings; and a lightweight poncho for rain. Remember: Be Prepared.

Camp Traci has procured a special shipment of WOW tee shirts that would make a great souvenir or memento. Please see WOW TEE-SHIRTS under Additional Information or call the camp desk or camp director for more information.

CAMP FEES

- \$45 per girl
- Leaders attend free
- \$10 Meal Plan per participant (lunch or dinner for both days)
- **\$10 non-refundable**, per-girl deposit
- Camp Fees are due in full by April 1, 2015

TO AVOID FORFEITING CAMP FEES, WE STRONGLY ENCOURAGE OBTAINING FIRM COMMITMENTS FROM LEADERS, GIRLS AND FAMILIES PRIOR TO REGISTRATION.

REQUIRED FORMS

The following forms are required for *each group* at check-in.

- Two rosters of the youth attending camp. One will be turned in at check-in, the other will be retained by leaders. Please include each youth's name, address, phone number, and birth date.
- Receipts that confirm registration and payment.

The following forms are required for *each girl* at check-in:

- Annual Health and Medical Record (Parts A and B)
- PARENTAL INFORMED CONSENT AGREEMENT (This is our climbing permission form.)

The following forms are required for *each adult* at check-in:

- Annual Health and Medical Record (Parts A and B)

For your convenience, these forms are included at the back of this guide. Photocopy and distribute them as needed.

SIMPLIFYING CHECK-IN

- Pay all camp fees by April 1
- Have your forms collated by form, not by girl. They should be in this order:
 1. *Group rosters*
 2. *Receipts*
 3. *Medical forms*
 4. *Parental Informed Consent Agreements*

PLEASE REMEMBER THAT THE SIGNATURE OF A PARENT OR LEGAL GUARDIAN IS REQUIRED ON ALL ACTIVITY CONSENT AND MEDICAL FORMS.

REFUND POLICY FOR COUNCIL CAMPS

- Camp refunds are sent to a unit's sponsoring institution.
- The \$10 per youth reservation individual deposit fee is NOT refundable.
- Cancellations or refunds requested prior to June 1 will be refunded at 100% less the per youth deposit.

- After June 1, all qualifying refunds will be 50% less the per youth deposit until one week prior to your first day of camp.
- No refunds after one week prior to your first day of camp.
- Due to administrative costs, we will not issue refunds for less than \$25.00.
- Requests for refunds MUST be submitted online; form is available on the council website www.saltlakescouts.org under Forms and Materials.
- Refund requests will be handled in the service center by the Director of Camping and/or the camp desk personnel until one week prior to your first day of camp.

LEAVE NO TRACE

Camp Traci follows the seven principles of Leave No Trace. Please review and practice these principles with your girls and use them in your planning. Learn more about teaching Leave No Trace principles at <http://www.scouting.org/scoutsource/BoyScouts/TeachingLeaveNoTrace.aspx>.

PERSONAL GEAR

The camp experience is enhanced when girls bring the appropriate personal gear – hat, sunscreen, water bottle, compass, daypack, light jacket, etc. Leaders need to instruct girls on what is appropriate and how to care for those items. The care and safekeeping of all personal items is the responsibility of the girl.

CAMPFIRE PREPARATION

The camp-wide campfire at the conclusion of camp is your opportunity to entertain our staff and the other participants. Please come prepared with a fun song, skit or story to perform for the rest of camp. Please remember to bring your props.

First Day of Camp

ARRIVAL AND PARKING

- Camp Tracy's parking lot entrance is gate G (on the right side of the road, just **past** the Tracy Training Center gate)
- Our check-in process is simple and quick so arrival more than 10 minutes before the check-in time is not recommended
- Our staff will direct you to a parking spot. As a safety precaution, vehicles will be **backed** into parking spots
- Do not block any roadways
- Leave your lunches and swimsuits in your car until after you have checked in
- Because parking is limited, *carpooling is strongly encouraged*

CHECK-IN

- Our staff will greet and direct you. Check-in begins at 12:30p.m. for July courses and 8:00a.m. on August 3.
- Leaders and girls proceed to the trading post porch for a quick orientation and wristbanding.
- One leader (with paperwork) will proceed to the check-in area.
- The other leader(s) will have charge of the youth. They can tour the camp or visit the trading post.
- Leaders and girls should meet up and find a seat in the amphitheater (behind the trading post) by 8:25a.m.

Our check-in staff will provide you with and orient you to the following

- *Camp and Activity Schedule*
- *Camp Map*
- *Swim Check Tracking Sheet*
- *Evaluation Sheet-Day 1*

Our staff will collect and process the following paperwork:

- *Pre-checked group roster*
- *Financial form (receipt)*
- *Medical forms*
- *Parental Informed Consent Agreement*

PLEASE REMEMBER THAT CHECK-IN GOES FASTER IF YOU HAVE YOUR FORMS COLLATED BY FORM TYPE, NOT BY GIRL.

Our staff will also ask you about the following

- **Early Departures.** *We need to know who is coming to pick up the girl and what relationship the person is to her*
- **Special Needs.** *Please let us know if you have girls with special needs so we can assist you*

OPENING CEREMONY

The opening ceremony begins at 1:00 p.m. (8:30 a.m. on August 3) and is held in the amphitheatre behind the trading post. Participants will participate in a flag ceremony; enjoy the songs and skits and receive instructions for the day.

ACTIVITY AREAS

While at camp, girls will follow a set schedule. Groups will receive a schedule and map at check-in. Camp Tracy junior staff will be instructing in most activity areas. Leaders can help keep the girls engaged and on task.

SAFETY CONCERNS

Safety is job #1 at Camp Tracy. Staff, girls and leaders are asked to observe the high standards of safety found in the National Camp Standards, Guide to Safe Scouting, policies of the Great Salt Lake Council and Camp Tracy.

Areas of special concern include the shooting ranges, swimming pool, lake and climbing wall. These areas are staffed by mature, responsible adults who are well trained and certified. They are very safety conscious. Leaders and girls are required to listen and follow the instructions of area directors and staff if they wish to participate.

All girls, leaders and staff are responsible for safety at camp. However, adults have a special role. While we want staffers to have the freedom to do their jobs as part of the Boy Scout leader training program, adults are expected to intervene in any situation they believe may compromise the safety of a staffer, girl, or leader. Staffers and girls are expected to defer to **any** adult with a safety concern. Staffers, girls and leaders have a responsibility to report any safety concerns, near misses or accidents to camp administration (commissioner, program director, or camp director) immediately.

SWIMMING

The first item of business at the pool is the swim check. Our experienced staff will divide the girls and leaders into ability groups and administer a swimming test. The groups include non-swimmer, beginning swimmer and swimmer. All groups may participate at the pool and lake, but ability level will determine each participant's levels of participation and supervision.

SWIMMING (Continued)

If girls will dress quickly (both entering and exiting the pool area) and follow the directions of the instructors and lifeguards, they should have time to practice rescue throws, receive swimming instruction or just recreate.

If possible, have one of your leaders come prepared to enter the pool and assist the pool staff in administering the test.

SWIMMER'S TEST:

Jump feet first into water over the head in depth, level off, and begin swimming. Swim 75 yards in a strong manner using one or more of the following strokes: sidestroke, breaststroke, trudgen, or crawl; then swim 25 yards using an easy resting backstroke. The 100 yards must be swum continuously and include at least one sharp turn. After completing the swim, rest by floating.

BEGINNER'S TEST:

Jump feet first into water over the head in depth, level off, swim 25 feet on the surface, stop, turn sharply, resume swimming as before, and return to starting place.

We suggest you place all your members' swimming gear (suits and towels) in one bag. This will allow you to leave the bag in your car until just before your group heads for swimming and to return it to the car as soon as you are finished. Separate changing facilities will be provided for youth, adult men, adult women and those requiring special assistance from a parent or guardian.

MEALS

During the July sessions of Camp Traci, dinner time will be 6:45 p.m. For those on the meal plan (\$10 per person for both days) dinner will be served in the pavilion (next to the Ga-Ga ball pit across from the swimming pool). Girls and leaders bringing their own dinner are welcome to eat in the pavilion, any of the tables around camp or on a blanket in the woods.

During the August session of Camp Traci, there will be two lunch times built into the schedule. The schedule you receive at check-in will indicate which lunch time you are assigned. For those on the meal plan (\$10 for both days) lunch will be served in the pavilion (next to the Ga-Ga Ball pit across from the swimming pool). Girls and leaders bringing their own dinner are welcome to eat in the pavilion, any of the tables around camp or on a blanket in the woods.

The trading post, with drinks and food items, will be open during meal times.

FREE TIME

Built into each group's schedule is a free time slot. The free time slot allows time for your group to visit the trading post, participate in some additional activities outside the regular activity time or to just relax and enjoy nature.

Additional activities include:

- Geocaching – Directions are available at the camp office. There are a limited number of loner GPS devices.
- One Mile Compass Course – Directions are available at the camp office. Participants will need to provide their own compasses.
- Service Project – Our commissioner staff will assign service projects to interested groups. Projects take 15-20 minutes.
- Flag Ceremony Practice – Groups can report to the flagpoles in front of the amphitheater to review, practice and conduct flag ceremonies.
- Campfire Preparation – This would be a great time to practice your song, skit or story for the concluding campfire.

EMERGENCY HORN

In case of a camp wide emergency, an air horn will sound three times. If this happens, everyone needs to report immediately to the amphitheater which is located behind the trading post.

CAMPFIRE PROGRAM AND CRACKER BARREL

- Our camp-wide campfire program is scheduled for 7:30 p.m. (3:00 p.m. on August 3) at the fire bowl next to the Tracy Lodge. The program will consist of skits, songs, stories, and presentations by our staff.
- Campfire begins as a fun, playful event and progresses to a reverent and spiritual conclusion. The leaders' job is to help the girls enjoy the fun and feel the reverence as appropriate.
- Campfire is followed by a cracker barrel (refreshments and mingling) which is the conclusion of our program for the day.

ADULTS MUST WEAR A WRISTBAND AT ALL TIMES. THEY ARE DURABLE AND CAN BE WORN IN THE POOL. IF AN ADULT LOSES A WRISTBAND, THEY SHOULD IMMEDIATELY CONTACT THE COMMISSIONER STAFF FOR A REPLACEMENT. LATE ARRIVALS AND VISITORS MUST CHECK IN AT THE OFFICE AND OBTAIN A WRISTBAND.

Second Day of Camp

ARRIVAL AND PARKING

- Our check-in process is simple and quick so arrival more than 10 minutes before check in time is not recommended.
- Camp Tracy's parking lot entrance is gate G (just **past** the Tracy Training Center gate).
- Our staff will direct you to a parking spot. As a safety precaution, vehicles will be **backed** into parking spots.
- Do not block any roadways.
- Leave your lunches and swimsuits in your car until after you have checked in.

CHECK-IN

- Check-in begins at 12:30 p.m. for July courses and 8:00 a.m. on August 4.
- One leader will proceed directly to the check-in table to report on the number of youth and adults attending.
- The other leader(s) will take the youth to the amphitheatre. They are invited to visit the trading post along the way.

OPENING CEREMONY

The opening ceremony begins at 8:30 a.m. (1:00 p.m. on August 4) and is held in the amphitheatre behind the trading post.

ACTIVITY AREAS

Follow the schedule and map you received the first day at check-in. Our commissioner staff can help you with lost schedules, maps and forgotten group letters. Follow the instructions outlined under **ACTIVITY AREAS** under First Day of Camp.

MEAL TIMES

Follow the instructions under **MEAL TIMES** under First Day of Camp.

FREE TIME

Follow the instructions under FREE TIME under First Day of Camp.

CHECK OUT

As you enter the fire bowl for the campfire program, a packet will be waiting for you. This packet will include your medical forms and canyon passes. Also, please check the lost and found chest for any lost articles.

Units leaving early will be responsible for picking up their packets from the camp office.

CAMPFIRE PROGRAM

- Our camp-wide campfire program is scheduled for 7:30 p.m. (3:00 p.m. on August 4) at the fire bowl next to the Tracy Lodge. This is your opportunity to entertain our staff. The program will consist of stories, skits, songs and presentations by the girls and their leaders and will conclude with a patriotic presentation by our staff that prepares the camp to participate in our Honor Trail.
- Honor Trail will begin immediately following the Campfire program. Please remain seated quietly until excused for the Honor Trail.

HONOR TRAIL

- Honor Trail is a reverent experience in which members of the Camp Tracy staff present the values of Scouting. Although this presentation is Scouting based, the values it teaches are universal. It can be a positive and inspiring experience that will help the girls understand the values boys are being taught in Scouting. Please help your girls be reverent (quiet and attentive) during the presentation of the Honor Trail.
- The presentation takes place on a guided hike around Taylor Lake. It is a mostly level and a smooth walk and most participants should have no problem navigating the trail. If you have girls or leaders who might have difficulty or require assistance, please notify the commissioner in advance and every effort will be made to provide accommodation.
- The Honor Trail is the conclusion of our program and you will be excused to depart for home from there. Please help your girls maintain the reverent feeling as they head home. If appropriate, you may wish to talk with your girls about their Honor Trail experience.

Additional Information

RESTROOM AND HANDWASHING FACILITIES

When Scouts are at Camp Tracy, the flushing toilets at the swimming pool and in the Tracy Lodge are reserved for adult use only. Scouts use the KYBOs located throughout camp. This rule does not apply to the girls at Camp Traci. Make sure they understand that they are welcome to use the indoor facilities.

It is a long walk from some of our program areas to the indoor facilities and your girls may prefer using the KYBOs. Please make sure they understand that the KYBOs are pumped, cleaned and stocked regularly. If there are any problems, please let the commissioners' staff know immediately.

Hand washing stations are available next to each set of KYBOs. They are stocked with soap (in a nylon sock tied to the station) and cleaned regularly. Girls are encouraged to wash their hands often. They will dry their hands using the "open air" system. There is a water bib located between the archery and rifle range where it is recommended that girls rinse their hands after participating in the rifle shooting activity because the gun powder residue can cause irritation.

WATER

Water bibs are located throughout the camp. The water is treated and safe for drinking and minor first aid. Please be sure the girls know the location of these bibs and use them to stay hydrated. In the case of a loss of pressure, water stations will be established.

LOST AND FOUND

Lost and found is located in the trading post. Please check there if you find or lose an item. On the last day of camp, right before the closing campfire, the lost and found box will be brought down to the campfire bowl. Please check the box for any missing items, but do not “shop” the box. Lost items will be held for three days and will then be donated to a local thrift store.

FIRST AID

Leaders are responsible for the initial first aid for their girls. First aid kits are available at each activity station and at the camp office and trading post. Each of our staff members has been trained in basic first aid and will act as a resource if you need help.

Serious injuries should be reported to the camp office immediately. The camp office is a quick walk from any point in camp and radios are available at the climbing tower, the lake and the pool. A medical officer will be dispatched to determine the best course of action.

EMERGENCY CONTACT

Cell phone service is very spotty in the canyon and should not be relied upon for emergency calls. Most cell phones quit working well at the mouth of the canyon near Wasatch Blvd. The best method for calling in and out of camp is the land line.

The phone number for the camp office is 801-272-8668. This line is available for adults to make outgoing calls and a staff member is assigned to man the phone during the hours camp is in operation. During dinner and campfire (when the office is closed) the landline will be available at the Tracy Lodge.

Those making calls into the camp need to realize that the line is a party line shared with the Webelos Camp when it is in session. Webelos camp is instructed to answer on the first four rings. If the call is for Camp Traci, the caller will be asked to redial and Camp Traci answers on the fifth ring.

Make sure all those who may need to call the camp (parents, spouses, etc.) are aware of your group and leaders’ names so that we can more easily locate your unit in the case of a call.

OUT OF BOUNDS AREAS

To help control erosion and to keep campers safe, the following rules have been established:

- Stay on the established trails (especially when hiking the mountain)
- Hiking or playing on the creek bank or in the creek is prohibited at all times
- Hiking or playing on the hillsides that border the camp is prohibited at all times

TRADING POST

The trading post sells souvenirs, snacks, drinks, apparel, and outdoor-themed items. Cash, debit cards and credit cards are readily accepted at camp. Checks are accepted only with the express approval of the trading post manager or camp director.

The trading post is open before lunch, during activity times, and lunch and other times that will be posted.

Knives are available for sale, but will only be sold to girls who have earned their Totin’ Chip (ask the Trading Post staff how to earn one). Girls and leaders are advised to determine and respect parental attitudes regarding the purchase and use of knives. Girls and leaders are also responsible for the safe use of the knife after it is purchased.

Camp Traci has its own branding iron used for souvenir branding. Branding of items purchased from the trading post is available upon request. Branding of girls’ personal items (hats, back packs, etc.)

requires parental permission (form available in trading post) and will only be done on the second day of camp.

WOW T-SHIRTS

Our camp has procured a special order of fun tee-shirts with the WOW design. The shirts are included in your camp fee, but we ask that you specify each girl's shirt size when you register for camp. We will group the shirts together by the sizes you request and have them ready for you at check-in on the first day.

FORMS

For your convenience, the following forms are included in this guide.

- *PARENTAL INFORMED CONSENT AGREEMENT*
- *Annual Health and Medical Record*
- *Roster Template.*

**PARENTAL INFORMED CONSENT AGREEMENT
HOLD HARMLESS and PHYSICAL FITNESS CONSIDERATION
FOR CLIMBING ACTIVITIES**

I understand that participation in climbing activities offered through the Great Salt Lake Council, BSA, from June 1, 2015 through August 5, 2015 at Camp Tracy, involves a certain degree of risk that could result in injury or death. In consideration of the benefits to be derived and after carefully considering my child's physical fitness along with the risk involved, and in view of the fact that the Boy Scouts of America is an organization in which membership is voluntary, and having full confidence that precautions will be taken to ensure the safety and well-being of my child, I give consent for my child: _____

NAME OF CHILD

to participate in the Camp Traci Climbing Tower Activity during the Camp Session of _____.

DATES OF CAMP SESSION

My child does not have any health conditions that would hinder her participation in any of these activities.

If I have any questions about these activities, I understand I can call the Great Salt Lake Council at (801) 582-3663 and have the activity explained to me. I also agree to release and hold harmless employees, officers, directors and waive all claims I may have against the Boy Scouts of America. In case of emergency, I understand every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the physician selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication to my child.

One signature is sufficient

Signature of Parent/Legal Guardian

Signature of Parent/Legal Guardian

Emergency Telephone Number

Emergency Telephone Number

Part A: Informed Consent, Release Agreement, and Authorization

Full name: _____
 DOB: _____

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.



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, Philmont Training Center, Northern Tier, Florida 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)

Second parent/guardian signature for youth: _____ Date: _____

(If required; for example, California)

Complete this section for youth participants only:

Adults Authorized to Take to and From Events:

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

Name: _____

Name: _____

Telephone: _____

Telephone: _____

Adults NOT Authorized to Take Youth To and From Events:

Name: _____

Name: _____

Telephone: _____

Telephone: _____



Part B: General Information/Health History

Full name: _____
DOB: _____

High-adventure base participants:
 Expedition/crew No.: _____
 or staff position: _____

Age: _____ Gender: _____ Height (inches): _____ Weight (lbs.): _____
 Address: _____
 City: _____ State: _____ ZIP code: _____ Telephone: _____
 Unit leader: _____ Mobile phone: _____
 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
<input type="radio"/>	<input type="radio"/>	Diabetes	Last HbA1c percentage and date
<input type="radio"/>	<input type="radio"/>	Hypertension (high blood pressure)	
<input type="radio"/>	<input type="radio"/>	Adult or congenital heart disease/heart attack/chest pain (angina)/heart murmur/coronary artery disease. Any heart surgery or procedure. Explain all "yes" answers.	
<input type="radio"/>	<input type="radio"/>	Family history of heart disease or any sudden heart-related death of a family member before age 50.	
<input type="radio"/>	<input type="radio"/>	Stroke/TIA	
<input type="radio"/>	<input type="radio"/>	Asthma	Last attack date
<input type="radio"/>	<input type="radio"/>	Lung/respiratory disease	
<input type="radio"/>	<input type="radio"/>	COPD	
<input type="radio"/>	<input type="radio"/>	Ear/eyes/nose/sinus problems	
<input type="radio"/>	<input type="radio"/>	Muscular/skeletal condition/muscle or bone issues	
<input type="radio"/>	<input type="radio"/>	Head injury/concussion	
<input type="radio"/>	<input type="radio"/>	Altitude sickness	
<input type="radio"/>	<input type="radio"/>	Psychiatric/psychological or emotional difficulties	
<input type="radio"/>	<input type="radio"/>	Behavioral/neurological disorders	
<input type="radio"/>	<input type="radio"/>	Blood disorders/sickle cell disease	
<input type="radio"/>	<input type="radio"/>	Fainting spells and dizziness	
<input type="radio"/>	<input type="radio"/>	Kidney disease	
<input type="radio"/>	<input type="radio"/>	Seizures	Last seizure date
<input type="radio"/>	<input type="radio"/>	Abdominal/stomach/digestive problems	
<input type="radio"/>	<input type="radio"/>	Thyroid disease	
<input type="radio"/>	<input type="radio"/>	Excessive fatigue	
<input type="radio"/>	<input type="radio"/>	Obstructive sleep apnea/sleep disorders	CPAP: Yes <input type="radio"/> No <input type="radio"/>
<input type="radio"/>	<input type="radio"/>	List all surgeries and hospitalizations	Last surgery date:
<input type="radio"/>	<input type="radio"/>	List any other medical conditions not covered above	



Part B: General Information/Health History

Full name: _____
 DOB: _____

High-adventure base participants:
 Expedition/crew No.: _____
 or staff position: _____

Allergies/Medications

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
<input type="radio"/>	<input type="radio"/>	Medication		<input type="radio"/>	<input type="radio"/>	Plants	
<input type="radio"/>	<input type="radio"/>	Food		<input type="radio"/>	<input type="radio"/>	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 INDICATE 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 by the BSA. 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)
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	Tetanus	
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	Pertussis	
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	Diphtheria	
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	Measles/mumps/rubella	
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	Polio	
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	Chicken Pox	
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	Hepatitis A	
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	Hepatitis B	
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	Meningitis	
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	Influenza	
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	Other (i.e., Hib)	
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	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: _____