## 2011 Florida Sea Base YOUTH APPLICATION

Circle program preference: (Program details can be found at: www.bsg	Coral Reef Sailing program aseabase.org )	Ke	ys Adventure program
Name:(Please print)	Troop/Crew#	Dist:	
Address:			
City:			
Date of Birth:	Phone:	e-mail:	
Rank:	Current position in yo	our unit:	
Leadership positions previously	held:		
Circle all awards earned:			
Swimming MB	Scout Life Guard		Snorkeling BSA
Lifesaving MB	Mile Swim BSA		Kayaking BSA
Small Boat Sailing	g MB	Water Sports MB	
Are you certified in CPR? Y	es No		
Long-term camping experiences	s you have had, with dates:		
School athletic teams: (team/yea	ar)		
Non-School physical activities:	(i.e. Soccer, Lacrosse, Swi	im Team, Mountain	Biking)

I enclosed the reservation fee of \$100.00 required with this application. (See refund policy on the back) I agree to adhere to the Code of Conduct, to obey and cooperate with the contingent leaders, to meet my full responsibilities as a member of our contingent, take such preliminary training as required, and to wear the official uniform, as directed by my crew advisor.

I certify that I am now, or will be, at least 14 years of age by January1, 2011 and attained the qualifications listed in this application as required for all Boy Scout, Varsity Scout, and Venture participants.

I further agree to submit evidence of fitness to make this trip on the official health form signed by a licensed physician; also that I will obtain immunizations if required.

Participant's signature \_\_\_\_\_

## **APPROVAL OF PARENTS OR GUARDIANS**

On behalf of my child and myself, I (we) hereby approve and agree to all the terms and conditions of this application and to its correctness. Further, I (we) certify that the applicant can meet the health and physical requirements of the Florida National High Adventure Sea Base and will be examined by a licensed physician.

(Parent/guardian signature)	(Parent/guardian signature)

## **RECOMMENDATION FROM SCOUTMASTER/CREW ADVISOR**

I recommend this member for participation in the 2011 Suffolk County Council Florida High Adventure Sea Base Expedition based on their personal qualifications and the health and physical requirements of the Sea Base expedition.

Troop/Crew #	¥
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(Scoutmaster / Advisor signature)

Submit (with \$100.00 deposit) to:

Suffolk County Council, BSA 7 Scouting Blvd Medford, NY 11763

## **Refund Policy**

The Suffolk County Council will make every effort to fill all openings in each High Adventure Base expedition and to establish a waiting list for each trip.

If a confirmed participant cancels their reservation all payments received to that date, less the initial application deposit, would be refunded if the vacancy can be filled.

If the vacancy cannot to filled only payments received, less the initial deposit and any non-refundable expenses already paid by the council to that point can be refunded.