

# TROOP 505 Sept '2011 CAMPOUT REGISTRATION

What: HIKING, ORIENTEERING, AND COOKING COMPETITION CAMPOUT

Where: Devils Lake State Park, WI.

When: Friday, Sept. 16<sup>th</sup> thru Sunday, Sept. 18<sup>th</sup>.

Activities:

- 1 Welcome to beautiful Wisconsin
- 2 Hike the scenic trail around the lake ( 7 or maybe you feel like 14 miles). Older Scouts will be hiking to find their lunch.
- 3 First year Scouts get that hike requirement for advancement.
- 4 Cooking competition – Best complete weekend menu – Sat. dinner must use a Dutch Oven
- 5 Those that need cooking for your rank, This is your chance to get it.

Arrival: 5:30 P.M. Friday Sept. 16<sup>th</sup> - Drop off Scouts PNC Bank parking lot on Gartner, be prompt.

Load-up: 5:30 P.M. to 6:00 P.M. - We need your help to load up and get out on time.

Departure: 6:00 P.M. sharp! - We need to get to camp and get set up before cracker barrel!

Return: Scouts will arrive at PNC Bank parking lot after 1:00 P.M. on Sunday, Sept. 18<sup>th</sup>.

Fees: \$40 per Scout/Adult. Please make check payable to Troop 505 & submit with form.

**Forms/Commitment & Fees need to be in to Mr. Wilson by Wed. Sept. 7<sup>th</sup> !!!**

General Notes:

- Forms or email/phone commitment to be turned in by Wed. Sept. 7<sup>th</sup>
- Be prompt to drop off your Scout(s). (Drop off at PNC Bank parking lot)
- Park in bank parking lot if you are driving to Campout.

Specific Notes:

- If you are running late & it is nearing departure, call Jezza Sutton ( 312-513-3810 ).
- You may be asked to drive and help supervise campout if your Scout attends.
- Direct Campout questions to event Scoutmaster Jezza Sutton ( 312-513-3810 ).
- Emergency contact person for this campout is Lisa Sutton ( 630-416-8427 ).
- Planning to arrive late or leave early, you must notify Mark Wilson ( 630-854-3352 ) one week prior.

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**CUT AND RETURN BOTTOM PORTION WITH PAYMENT**

Scout's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Patrol Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent camping? Y / N Parent will drive to Y / N, and/or from Y / N Cell (driver) \_\_\_\_\_

Vehicle Driving – Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ # Seat Belts \_\_\_\_\_

Special Transportation needs: Arrive Late? \_\_\_\_\_, Leave Early? \_\_\_\_\_, Or Other? \_\_\_\_\_

Explain: \_\_\_\_\_

Food allergies or restrictions? \_\_\_\_\_, Explain: \_\_\_\_\_

Will your Scout be taking prescription medicine during this Camp out? Yes \_\_\_\_ No \_\_\_\_

If yes, name of medication(s): \_\_\_\_\_

**(Epi Pens & Inhalers as listed on Class I's are to be on Scouts' person at all times.)**

Use Escrow Account Y / N \$ \_\_\_\_\_

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

DEVILS LAKE CAMPOUT SEPT. 16<sup>TH</sup> – 18<sup>TH</sup>