

Troop 777 Trek Sign Up

- Event:** March 2nd – 4th Joshua Tree Climbing
- Date:** March 2, 3, 4th 2011
- Description:** We will drive approximately 2 ½ hours from Encinitas to Joshua Tree, Set Camp Friday night, Climb on Saturday and Sunday morning, drive home Sunday afternoon. All climbing will be Top Rope climbing with 5.2, 5.5, 5.7 climbs. Scouts will have the opportunity to rappel. Grant Furnberg will also be leading us on a hike.
- Prerequisite:** **Climbing merit badge.**
- Meet at:** 5:00 PM at Sports Authority parking lot Friday, March 2nd, 2012
- Return:** Sunday Afternoon, 4th March, 2011.
- Cost:** \$45 / scout
- Other:** **Climbing shoes** are not provided and a benefit (**Can be rented at REI**). Climbing Harness and Helmet are available from the Troop gear. Bring some cash for lunch at IN & OUT on the way home!
- Personal gear:** Tent shelter, 3 layer clothing appropriate for cool nights, climbing in pants and thin layering for sun block. Hat/ Sunscreen/ Closed toe shoes. Day pack (To take to climbing site) should include Climbing gear, **water** and snack, windbreaker, sunscreen, hat. Camping check list available on Troop web site.
(5 Quart minimum water per scout)
- Instructions:** Please turn in signed permission slip and payment by February 20, 2012.

Scout in Charge: TBD

Adults in Charge: Trina Zeljak 760 815 2525, trinazeljak@gmail.com

Emergencies: David Zeljak 760 815-9175

(Keep this part for reference)

(Return this part with parent signature)

March 2nd - 4th Joshua Tree Climbing

Scout(s) Attending: _____ Cook Master: ____ Asst CM: ____

Parent Attending: _____

I Can Drive: _____ Total # Seatbelts _____

Reimbursement for gas by Scout Account: _____ or Check _____

Amt Pd: \$45 ea. x # _____ = \$ _____ Cash _____ Check _____

Parental Informed Consent Agreement For Climbing/Rappelling Activities

I understand that participation in the climbing/rappelling activity offered through the Desert Pacific Council, BSA, 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 the risk involved, and in view of the fact that the Boy Scout 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 son/daughter, I have given _____ (name), my consent to participate in the climbing activity shown above on the date shown above. 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 for my child. (**Both parents must sign.**)

Parent signature

Date

Parent signature

Date

Special Info: _____

(Return this part with parent signature)

(Event Name)

(Date: Start – Return)

Scout(s) Attending: (1) _____; (2) _____

BSA Health & Medical Form (Completion Date): (1) _____
Valid for one (1) year from date of completion (2) _____

Cook Master (Circle one): **YES / NO** Assistant Cook Master (Circle one): **YES / NO**

Adult(s) Attending: (1) _____; (2) _____

Required

- Youth Protection Training (Completion Date): (1) _____
Valid for two (2) years from date of completion (2) _____
- BSA Health & Medical Form (Completion Date): (1) _____
Valid for one (1) year from date of completion (2) _____

Additional Training for High Adventure Treks:

- CPR (Completion Date) _____
- First Aid (Completion Date) _____
- Climb On Safely (Completion Date): _____
- Physical Wellness (Completion Date: _____
- Safe Swim Defense (Completion Date): _____
- Safety Afloat (Completion Date): _____
- Trek Safely (Completion Date): _____
- Weather Hazards (Completion Date): _____
- Other: _____
- Other: _____

Special Info: _____

I Can Drive: _____ Reimbursement for gas by Scout Account: _____ or Check _____

Make, Model, Year, Color of Vehicle	License Plate	# of Seatbelts	Owner's Name	PUBLIC LIABILITY		
				Each Person (min = \$50,000)	Each Accident (min=\$100,000)	Property Damage (min=\$50,000)

Amt Pd: \$ _____ ea. x # _____ = \$ _____ Cash _____ Check _____ Scout Account _____
(Make checks payable to BSA Troop 777)

I understand that participation in activities offered through Boy Scouts of America (BSA) Troop 777 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 the risks involved, and in view of the fact that the BSA Troop 777 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 Scout(s), I have given (1): _____; (2) _____ (name), my consent to participate in the activity above on the dates shown above.

By signing below, I certify that the above information is true and accurate to the best of my knowledge. I understand that I may be required to supply proof of any of the above information and I or my Scout(s) may be denied permission to participate if the requested information is not provided.

Signature of Adult(s), Parent(s) or Legal Guardian(s): _____ Date _____
_____ Date _____