



Troop 84

National Trails Day



- When:** Saturday, June 7th, 2008
- Time:** 8:45 to 12:00 noon
- Who:** Venture Scouts and Adults – Parents we could use your help.
- Where:** Washington Valley Park, Bridgewater, NJ on the Middlebrook Trail
- Activity:** This local event is part of a nation-wide trail maintenance effort and is sponsored by the American Hiking Society and Somerset County Parks. On June 7th, in all 50 states across the country, organizations will participate in a grand community service project. Troop 84 will help by maintaining local trails. We will be repairing old trails and building new trails by installing erosion measures, steps, waterbars and cutting/clearing trees and debris. This of course will count for community service!
- Why:** As Scouts we are constantly using wilderness trails for backpacking, hiking and Mountain Biking. Especially our Troop! So we need to show our appreciation by helping in the building and upkeep of our area's trails!
- Signup:** Hand in Permission Slip on Monday, May 19th - NO FEE
- Transportation** Parents to provide.
- Wear:** Seasonal work clothes, long pants, boots, Troop hat.
- Bring:** 2 liters of water, snacks, work gloves.
Tools You also must bring: Spade shovel & iron rake & pruners
- Directions:** From Rt. 22, get on Chimney Rock Road/Thompson Rd
- Drive 1.5 miles until the road ends
- Turn left onto Wash. V. Rd.
- Make 2nd left onto Newmans Lane
- Travel on Newmans, until you cross over a small bridge park at small paved lot on left

OPTIONAL DOUBLE HEADER

Optional Mountain Bike Ride

What: After the Trail Maintenance, there is an optional Troop Mountain Bike Ride in Washington Valley Park. You must participate in the Trail Maintenance Service in order to join the bike ride – no exceptions. You do not have to do the bike ride after trail maintenance – the ride is optional!

Bring your lunch and drink in a cooler which we will leave in the cars during our trail maintenance. Right after the trail maintenance we will eat our lunch then mountain bike the challenging trails at Washington Valley. Also bring \$12 for a late afternoon stop for pizza. Pickup after Mountain Biking is 4 pm.

Make sure your bike is in working order. Must wear helmet.

- Bring extra water bottles for ride. – Bring biking clothes. – Bring \$12. – Bring spare tube.

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Signup Due May 19th

Scout _____ Will Participate in Trail Maintenance
 Will Participate in Trail Maintenance and Mountain Bike Ride
 Will NOT Participate

Parent _____ Will Participate in Trail Maintenance
 Will Participate in Trail Maintenance and Mountain Bike Ride
 Will NOT Participate

No Cost.

BOY SCOUTS OF AMERICA
TROOP 84 SOMERVILLE, NJ
WAIVER AND PERMISSION FORM

MY SON _____ HAS PERMISSION TO PARTICIPATE
(FIRST NAME) (LAST NAME)

WITH THE TROOP ACTIVITY KNOWN AS National Trails Day

WHICH WILL BE HELD AT Washington Valley Park, Bridgewater, NJ

MEDICAL CONDITIONS/RESTRICTIONS: _____

MEDICATIONS: _____

IN THE EVENT THAT YOU FIND IT NECESSARY FOR MY SON TO BE RETURNED HOME DUE TO ILLNESS OR OTHER REASONS, I MAY BE REACHED AT (PHONE) _____

OR AS AN ALTERNATIVE, CONTACT MR. /MRS. _____ AT _____

I hereby authorize the scout leaders to seek emergency care and further authorize the physician(s) to provide emergency treatment to my child for any laceration, fracture, other traumatic injury, any symptom, disease or injury which, in the judgment of attending physician, if untreated may be reasonably expected to increase the risk of harm to my child. This consent to care is to be in effect "only" after reasonable efforts have been made to contact and obtain my specific consent to any emergency treatment.

Parent's name (Print)

Parent's Signature

Date

In the event my son has a minor injury, I give my consent to the adult leader in charge to use his/her best judgment to decide if or when to administer the following over-the-counter medications:
Please check consented medications.

For headaches:	Acetaminophen (Tylenol)	_____
For muscle aches:	Ibuprofen (Advil)	_____
For hay fever, bee stings, poison ivy:	Antihistamine	_____
For upset stomach:	Antacid (Tums)	_____

Parent's Signature

Date