



Troop 84

Mid-Atlantic Scout

Orienteering Championship



When: **Saturday, May 3rd, 2008 – Rain or Shine!**

Event: Team up with a patrol member on this Mid-Atlantic Scout Orienteering Championship. This is a cross-country map and compass adventure designed to test your map and compass skills as well as your woodsman savvy!

Scouts will compete with other scouts of the same rank.

All scouts will compete in pairs.

Individual awards and troop awards will be presented.

Depart: 6:45 am from the First United Methodist Church

Return: Approximately 7:00 pm at the First United Methodist Church, you will be called for pickup.

Location: French Creek State Park, PA 610-582-9680

Signup: Monday, April 14th – No Late Sign Ups!

Trip Cost: \$15 due with permission slip at signup.

Wear: Hiking boots, hiking socks, sock liners, Class B troop shirt and troop hat, long pants, seasonal clothing and a watch.

Bring: Daypack, rain gear, 2 filled water bottles, lunch, trail snack, pocketknife, first aid kit, red pen and compass. **DON'T FORGET THE COMPASS!!**
Bring Cell Phone (for emergency use only), \$10 dinner money

Adult Leaders: We of course need you to drive. Young scouts may need you to tail them on the course. You can also participate/compete if you would like – No adult fee.

Dinner: Will stop on the way back, bring wallet with \$10.

Orienteering Championship Courses/Categories (Please Indicate Choice on Sign Up Form)

Course 1: For Sharks in pairs without adults. (If adults follow scouts, the scouts will be listed as non-competitive and non-eligible for awards or Troop points.)

Course 2: Second Class and First Class Scouts. (No adults allowed)

Course 3: Star and Life Scouts. (No adults allowed)

Course 4: Advanced for older scouts or adults to run alone - no partner allowed!

Orienteering

Signup and Payment Due April 14th – No Late Sign Ups

Scout _____ Will Participate Will Not Participate

Course Selected _____

Adult _____ Will Participate Will Not Participate

Course Selected _____ Help Sharks : _____ Just Drive : _____

Parent is available to provide transportation Yes No

If Driving, Number of Seat Belts (including driver) in Vehicle is

Trip Date : May 3 Trip Cost : \$15 Scout / \$0 Adult Total Paid : _____ by (Circle One) Cash Check Scout-Account

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 Orienteering

WHICH WILL BE HELD AT French Creek State Park, PA

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