

Summer 2010



INDIAN  
WATERS  
COUNCIL

## CAMP BARSTOW HIGH ADVENTURE PROGRAMS



High Adventure Director | William McCormick



## High Adventure Program Basis



Mission – To retain Boy Scouts, Explorer Scouts, and Venturing Scouts, as they become older and more distracted, by offering a series of Higher Adventure Opportunities where they develop better Outdoor Living Skills as well as Leadership Skills beyond the level of that offered at a Troop, Post, or Crew Level. This will be accomplished by the following:

- Promoting self-confidence and independence through leadership opportunities within a cooperative community of campers and knowledgeable staff, in a given adventure program.
- Teaching skill sets experientially through hands on training as well as practical experiences and lecture based sessions throughout the given adventure program.
- Encouraging Teamwork to solve problems within the group; with guidance to be offered, not decisions made, by the staff member(s) accompanying the given adventure program.
- Promoting respect for the natural environment through the understanding and practicing of the Leave No Trace Principles.
- Respecting the Individual for who he is and what he has to offer during the given adventure program.

Philosophy – The basic philosophy of the High Adventure Programs offered at Camp Barstow will be to follow the Boy Scout Oath, Law, Motto, and Slogan for the entirety of the adventure program experience.

Target Audience – Boy Scouts, Explorer Scouts, Venturing Scouts and Sea Scouts ages 14-21 or have completed the 8<sup>th</sup> grade, there are a few select slots available for adults 21 or older.

Adventure Programs Offered – The Bolded Programs are currently being offered and the remainder will occur on a rotation basis to where there is never more than 4 programs running during one summer (note the programs not offered are based on the success of the 2010 Extreme Expedition Trek, which is an Introduction to High Adventure Programs).

- **Island War Canoe Trek**
- **Sailing Adventure**
- Five Rivers in 5 Days
- Upper Palmetto Trail Hike
- Lower Palmetto Trail Hike
- Rock Climbing Adventure
- Foothills Trail Hike
- Congaree Swamp Adventure
- Five Peaks in 5 Days
- Whitewater River Adventure

Extreme Expedition – This is a brand **NEW** program being offered this summer, and promises to be the highlight of the Summer Camp Season. For more details on what this week will include, please turn to page 9.

## **General High Adventure Information**

All of the High Adventure Programs that Camp Barstow has to offer will have a base line of instruction that will occur during the adventure experience. Also, each program will have a base line skill in which they will “master” by the end of the trek, understanding that mastery of any skill takes years of experience. The programs will focus on two main areas of learning which are Outdoor Leadership Skills and Outdoor Living Skills; a third area of learning can be incorporated into the program aspect as well. This third opportunity will only occur if it is included in the goals set forth by each individual group, which is the completion of a few select merit badges. Finally, during most of the Adventure Treks the opportunity to earn the 50 Miler Award will present itself, and it will be up to each individual group to decide to complete a community service project to earn the Award.

### **Outdoor Living Skills to be offered** *(all will not be accomplished in one week):*

- Map / Compass
- How to Pack Properly
- Stove Operation / Maintenance
- Clothing Systems
- Water Treatment
- Cooking
- Fire Building
- Gear Selection
- Route / Itinerary Planning
- Leave No Trace
- GPS
- Tarp / Tent Set-Up / Maintenance

### **Leadership Skills to be offered** *(all will not be accomplished in one week):*

- Group Development
- Games / Initiatives
- Decision Making
- IP3 Collaboration Model
- Reflection
- Situational Leadership

All of the various topics listed above are meant to be 30 minutes to an hour lesson on each topic, note that an entire lifetime could be spent on some, this is just to introduce each topic and cover the basics as well as clear up any confusion and answer any questions that may come up during the discussions and activities.

### **Possible Merit Badge Opportunities:**

- Nature
- Fishing (for water based activities only)
- Canoeing (for water based activities only)
- Astronomy (only if weather cooperates)
- Weather
- Wilderness Survival
- Orienteering
- Sailing
- Other (any other brought to group at Camp)

Some of the Merit Badge Opportunities only allow for partials to be earned on the Adventure Treks, however, every effort will be made to complete as many requirements as reasonably feasible.

**Participation Requirements:** Each participant must meet the following requirements to be able to participate in any Camp Barstow High Adventure Experience.

- Must pass Swim Check and be of Swimmer Status (for all water-based adventures)
- Must be 14 years or older the day your trek is scheduled to leave Camp Barstow
- Be proficient in primitive camping skills
- Be physically fit (Medical Form at end of packet must be completed)
- Have a willingness to have a new Summer Camp Experience

**Rates and Dates:**

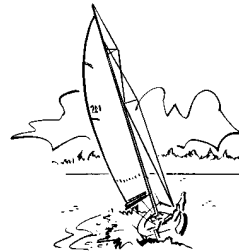
Island War Canoe - \$245

Lake Murray Sailing Adventure - \$245

Extreme Expedition - \$260

Island War Canoe and Lake Murray Sailing Adventure will occur the following dates:

- Session 1: **June 13-19, 2010**
- Session 2: **June 20-26, 2010**
- Session 3: **June 27-July 3, 2010**
- Session 4: **July 4-10, 2010**
- Session 5: **July 11-17, 2010**
- Session 6: **July 18-24, 2010**



Extreme Expedition Dates: **July 18-24, 2010**

**Registration Information:** Each trek will fill on a first come, first serve basis, and will allow for the following group numbers each week: **War Canoe** – 24 youth (under 21), and 2 adults (over 21); **Sailing Adventure** – 6 youth (under 21), and 2 adults (over 21); **Extreme Expedition** – 24 youth (under 21), and 2 adults (over 21). There will also be 1 trained staff guide (18 or older) that will accompany each Adventure Trek.

To sign up for any High Adventure Trek you must pay an **\$85 dollar deposit**, which is the first payment of the **\$245 trek fee**, this deposit will guarantee a slot to that participant (deposits are non-refundable, but transferable). Once a trek roster is full it is full, and if a slot later becomes available on a full trek, it will be on a first come, first served basis to fill that slot. Extreme Expedition will cost more than a normal trek due to the amount of traveling; therefore the fee is **\$260**.

If you have any questions about the registration process, please see page 10 for more information.

**Emergency Information:** Providing each Trek has tons of work that is put forth in planning and logistics. We will “do our best” to make sure that everything and everyone is accounted for and has a safe trek. That being said, each trek will file a route plan with the Camp Office before departing on their trek, and will have a communication device and first aid kit to cover almost any emergency that may occur in the field.

In the event that something does occur in the field and away from Camp Barstow, the High Adventure Director will be immediately notified. The Director will then notify the Council Scout Executive, who will make any calls necessary to parents/guardians and will counsel the High Adventure Director as per the best course of action and treatment as needed.

In the event should there be a family emergency in which the parents need to contact the youth participants please call the Scout Office at **(803) 750-9868**, and talk with the Scout Executive. He will then contact the camp, and work out the details with the High Adventure Director if extracting the individual(s) is needed from their trek.



**High Adventure Gear List** (*The list below is a suggestion of what to bring, a shakedown will occur with each group prior to departing on the trek to make sure things that are not needed are left, securely, at camp*):

**Sleeping**

- Sleeping bag in waterproof bag
- Foam sleeping pad
- Tent

**Packing**

- Internal/External Frame Backpack
- Waterproof bags (2 or 3)
- 12-24 Zip Lock bags

**Clothing**

- Layer A (Paddling Clothes)
  - Closed toe shoes
  - 3 pairs heavy socks
  - 3 pair inner socks (polypro)
  - 3 changes underwear
  - 2 hiking shorts
  - 2 short sleeve shirts (not nylon)
  - 1 hat or cap-flexible, with brim
  - Bathing suit
  
- Layer B (Cool Day/Evening)
  - 1 long sleeve shirt
  - 1 long pants (NO JEANS!)
  - 1 pair quick dry underwear
  
- Layer C (Wet, Cold, Windy)
  - 1 rain coat (NO PONCHOS!)

**Eating**

- 1 cup or bowl
- 1 spoon
- 3 or 4 one-quart water bottles

**Personal and Miscellaneous**

- Small pocketknife
- Flashlight (with extra batteries)
- Compass
- 2 bandannas or handkerchiefs
- Lip balm (chap stick)
- Toothbrush/toothpaste
- Deodorant
- Mosquito spray
- Small camp trowel
- Tampons/sanitary napkins
- Sunscreen at least 15 SPF
- Sunglasses

**Optional Items**

- Camera and film (with dry case)
- Whistle
- Watch
- Fishing equipment (license required)
- Note pad and pen
- Camp seat

**NO RADIOS, CD/MP3 PLAYERS, IPODS, VIDEO GAME DEVICES, HAMMOCKS, OR CELL PHONES.**

**Schedule of Events** *(due to each group's own dynamics the exact schedule of what is going to happen will vary, however this will provide a brief insight as to what should be expected):*

**Sunday** – Check-In, Swim Checks, Icebreakers, food packing, gear packing, route selection, and Opening Campfire.

**Monday** – Pack boats, Breakfast, Depart Camp Barstow, Paddle/Sail to 2 islands, 1 Outdoor Living Skills Lesson, 1 Outdoor Leadership Lesson, Various Games and Songs, Set-Up Camp, Supper, Bed.

**Tuesday** – Paddle/Sail to 2 islands, 2 Outdoor Living Skills Lessons, 2 Outdoor Leadership Lessons, Games and Songs.

**Wednesday** – Paddle/Sail to 2 islands, 2 Outdoor Living Skills Lessons, 2 Outdoor Leadership Lessons, Games and Songs.

**Thursday** – Paddle/Sail to 2 islands, 2 Outdoor Living Skills Lessons, 2 Outdoor Leadership Lessons, Games and Songs.

**Friday** – Paddle/Sail to 2 islands, 2 Outdoor Living Skills Lessons, 2 Outdoor Leadership Lessons, Games and Songs, Return to Camp Barstow, unpack / clean-up, Supper, Closing Campfire, Group Debrief / Evaluation.

**Saturday** – Closing Lesson, Breakfast, Group Picture, Check-Out.

This schedule will be adhered to for both the Island War Canoe and Lake Murray Sailing Adventure. Again, if the group chooses to work on a merit badge(s) it will be worked into the group's schedule. Individual's that are supposed to be Called-Out by the Order of the Arrow Wednesday Evening will have that opportunity wherever they are on Lake Murray at a special group specific campfire.



Again, since each group will have different goals and expectations of one another, each trek will be specifically geared towards those goals and meeting those needs. The above agenda gives an insight as to what will generally be expected, however the actual agenda will vary from group to group.



## Trek Specific Information

***Island War Canoe*** (offered each week of Summer Camp, as well as Extreme Expedition)

**Overview:** This program was started in 2005 and has run successfully for the past 5 years. It consists of 12 to 14 individuals canoeing around Lake Murray in one of two Indian War Canoes. Upon arrival at Camp Barstow preparations begin immediately for this five day trek across the lake; it all starts with swim checks, gear packing, food selection and packing, deciding as a group which 10 islands out of 30 total to visit during the week, and finally choosing any merit badges that the group may be interested in completing while on the trek (the list of merit badges to choose from can be found on page 3 of this guide).

The group will then head out bright and early Monday morning from the Boat Docks at Camp Barstow to the open waters of Lake Murray; only to return Friday afternoon in time for supper. While on the trek the participants will prepare their own meals, camp in primitive settings, learn various leadership skills, hone in their outdoor living skills, and work as a team to paddle the War Canoe across the lake to each destination.

This adventure is sure to be fun filled for all participants involved and it promises to be an adventure that will not soon be forgotten!

***Lake Murray Sailing Adventure*** (offered each week of Summer Camp, as well as Extreme Expedition)

**Overview:** This program started in 2008 and has run successfully for the previous two summers. It consists of 6 to 8 individuals sailing around Lake Murray in a racing style Sail Boat (*there will be two boats each week, max of 4 to a boat*). Upon arrival at Camp Barstow preparations begin immediately for this five day trek across the lake; it all starts with swim checks, gear packing, food selection and deciding as a group the trail to blaze across Lake Murray. Each sail boat will have an experienced Sailing Captain to teach the Scouts and Leaders the various workings of a sail boat, and will include a night time voyage on Lake Murray.

The group will then head out for the open waters of Lake Murray bright and early Monday morning only to return to Camp Barstow late Friday afternoon. During the trek participants will cook their own meals, camp in the Sail Boat as well as on various islands, learn how to operate as a team, and learn the in's and out's of open water sailing. This adventure is fun for all Scouts and Leaders ages 14 and up.

The Lake Murray Sailing Adventure promises to be an experience that will not soon be forgotten by Scouts, Leaders, or the staff that accompanies this Sailing Adventure Trek.

**Extreme Expedition** (cost = \$260 per participant)



**Overview:** The Extreme Expedition Program is new to Camp Barstow this year, and has a lot to offer for one week! This fun and exciting new program will feature a 2-day Backpacking Trip through one of Carolina's National Forests. Other activities will include COPE, SCUBA, and a Whitewater Adventure. Each group of 10 to 12 participants will have the opportunity to experience each of these adventures in the same week, which will leave you wanting more by the end!

The participants will check-in Sunday Afternoon between 1 and 3pm, and the fun gets started right away with immediate preparations for each of these different excursions away from Camp Barstow. First things to be done are a swim check (must be of swimmer status), gear packing, food selection and packing, route planning, and of course getting to know your group.

The groups will then depart bright and early Monday morning to their own experiences, only to be at Camp Barstow for those two in camp activities, SCUBA and COPE. Upon completion of the week, participants will have the opportunity to share stories with the other groups as well as group debriefs of the experience and evaluations of how they thought the week went.

The Extreme Expedition at Camp Barstow is one not soon to be forgotten by those who participate in it whether it is participants, leaders, or staff! And if successful, this program is the stepping stone to offering more new and exciting High Adventure Programs to Camp Barstow in the years to come! So, what are you waiting for?! Sign up today! This adventure is fun for all Scouts and Leaders ages 14 and up.

**Schedule of Events:**

**Sunday** – Check-in, Group Gatherings, Trek Preparations

**Monday** – COPE

**Tuesday** – Backpacking Expedition

**Wednesday** – Backpacking Expedition

**Thursday** – Whitewater Adventure/SCUBA

**Friday** – SCUBA

**Saturday** – Group Debriefs, Evaluations, Check-Out



## High Adventure Application Process

The 2010 Camp Barstow High Adventure Activities will follow the following process when determining availability of slots on each crew:

Slots will be on a first come, first served basis, and is individual sign-up (if you wish to attend and your Troop has already paid for a crew then you may do that). Your first payment on any program is your deposit which is \$85.00, this deposit will SEAL you slot on the crew of your choice, and is non refundable (but is transferable after your slot is filled should you change your mind).

- There are 24 Youth (under 21) slots and 2 Adult (over 21) slot for each War Canoe Trek.
- There are 6 Youth (under 21) slots and 2 Adult (over 21) slot for each Lake Murray Sailing Adventure Trek.
- There are 24 Youth (under 21) slots and 2 Adult (over 21) slot for each Extreme Expedition Trek.

*\*A single trek of each is one week of camp.*

Should you find that any trek you wish to participate in is full please give us your second option, and we will put you on a waiting list for your number 1 trek (in order of paid deposits, followed by non-paid deposits) to make sure you have the possibility of getting your number 1 pick because inevitably someone will drop out before the program starts.

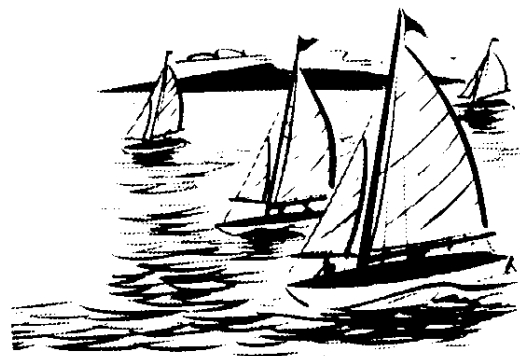
After your deposit has been paid and your slot chosen, you then must make the payments every time one is due to continue to hold your slot. Should you find that you will not be able to make a payment on time, please contact the Council Service Center and we will make a payment plan with you so that you may hold on to your slot. This is to ensure that you are still interested and planning to fully participate in the High Adventure Program at Camp Barstow.

**Make sure you submit a BSA Medical Form with your Application!** (*one is found at the end of this packet*)

The payment due dates are as follows (for out of Council participants your deposit is **\$90.00**):

- Payment 1 (deposit)= \$85.00 on or before **February 26<sup>th</sup>** (depending on number of available slots, deposits may be made after this date)
- Payment 2= \$80.00 on or before **March 26<sup>th</sup>**
- Payment 3= \$80.00 on or before **May 21<sup>st</sup>** (Extreme Expedition participants need to pay **\$95.00**)

Should you have any questions about this or any High Adventure Information please feel free to contact either the Council Service Center at (803) 750-9868 or Camp Director Larry Parrish at (803) 308-4851 or the High Adventure Director William McCormick at (803) 516-5854.



**2010 CAMP BARSTOW  
HIGH ADVENTURE APPLICATION**

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Name to be Called:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Trek Type (Please circle one):** **War Canoe**      **Sailing Adventure**      **Extreme Expedition**  
*(only offered July 18-24)*

**Trek Dates (Please label top 3 choices):**

\_\_\_\_\_ June 13- 19, 2010      \_\_\_\_\_ June 20- 26, 2010      \_\_\_\_\_ June 27- July 3, 2010

\_\_\_\_\_ July 4- 10, 2010      \_\_\_\_\_ July 11-17, 2010      \_\_\_\_\_ July 18-24, 2010

**DOB:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Height:** \_\_\_\_\_ **Weight:** \_\_\_\_\_ **Sex:** \_\_\_\_\_  
*(must be at least 14 by the day your trek begins)*

**Unit Type (circle one):** Troop   Crew   **Unit #:** \_\_\_\_\_ **Rank/Position:** \_\_\_\_\_

**Years at Summer Camp:** \_\_\_\_\_ **Years on Camp Staff:** \_\_\_\_\_

**Previous High Adventure Experiences:** \_\_\_\_\_

**Emergency Contact Information**

**Primary Contact**

**Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Secondary Contact**

**Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**2010 CAMP BARSTOW  
HIGH ADVENTURE PHOTO RELEASE**

I hereby assign and grant to the Boy Scouts of America the right and permission to use and publish the photographs/film/videotapes/electronic representations and/or sound recordings made during my visit to Camp Barstow by the Boy Scouts of America, and I hereby release the Boy Scouts of America from any and all liability from such use and publication.

I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage and/or distribution of said photographs/film/video tapes/electronic representations and/or sound recordings without limitation at the discretion of the Boy Scouts of America and I specifically waive any right to any compensation I may have for any of the foregoing.

By signing below, I acknowledge I have read and promise to abide by the code of conduct for Camp Barstow, have read and understand all the information about the High Adventure Program, and agree with the Photo (Talent) Release Statement.

\_\_\_\_\_  
Participant Signature *(parent's signature required if under 18)* Date \_\_\_\_\_

**PARENTAL PARTICIPATION AGREEMENT**

*Our son/daughter has our complete permission to participate in a Camp Barstow work project during the period indicated above. We understand that these projects and treks are physically demanding and involve a high degree of personal risk to participants. It is understood that this is a voluntary activity and it is a privilege to be selected as a participant. We also acknowledge and agree with the Photo (Talent) Release Statement.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

**CODE OF CONDUCT**

The general welfare of any group depends on the conduct of each individual member. This ensures the success of our treks and provides the maximum benefit to every participant. As an participant, I understand this and support the reasonable demands of conduct expected of me.

*As a High Adventure Trek Participant, I will:*

- Live the Scout Oath and Law.
- Observe, respect, and strive to live the Boy Scout Outdoor Code.
- Observe the rules of Camp Barstow and the Trek Leaders.
- Wear my full official BSA uniform as required.
- Attend and participate in all functions of the program.
- Be personally responsible for damage or loss of property.
- Respect all safety procedures and learn to properly use equipment.
- Observe quiet hours.
- Keep my tent clean and dispose of trash in proper place.
- At all times, be considerate of participants and staff at Camp Barstow.
- Understand the purchase, possession, or consumption of alcoholic beverages, cigarettes or illicit drugs at any time during the program will not be permitted and will result in dismissal from the program at the expense of the participant. This standard shall apply to all participants. Compliance with state law regulations will apply at all times.
- Respect the laws of the State of South Carolina and Camp Barstow rules prohibiting the use of fireworks, firearms and gambling. Infraction of these regulations will be grounds for immediate dismissal from the program at the expense of the participant.

# Annual Health and Medical Record

(Valid for 12 calendar months)

## Medical Information

The Boy Scouts of America recommends that all youth and adult members have annual medical evaluations by a certified and licensed health-care provider. In an effort to provide better care to those who may become ill or injured and to provide youth members and adult leaders a better understanding of their own physical capabilities, the Boy Scouts of America has established minimum standards for providing medical information prior to participating in various activities. Those standards are offered below in one three-part medical form. Note that unit leaders must always protect the privacy of unit participants by protecting their medical information.

**Parts A and C** are to be completed annually **by all BSA unit members**. Both parts are required for all events that do not exceed 72 consecutive hours, where the level of activity is similar to that normally expended at home or at school, such as day camp, day hikes, swimming parties, or an overnight camp, and where medical care is readily available. Medical information required includes a current health history and list of medications. Part C also includes the parental informed consent and hold harmless/release agreement (with an area for notarization if required by your state) as well as a talent release statement. Adult unit leaders should review participants' health histories and become knowledgeable about the medical needs of the youth members in their unit. This form is to be filled out by participants and parents or guardians and kept on file for easy reference.

**Part B** is required with parts A and C for any event that exceeds 72 consecutive hours, or when the nature of the activity is strenuous and demanding, such as a high-adventure trek. Service projects or work weekends may also fit this description. It is to be completed and signed by a certified and licensed health-care provider—physician (MD, DO), nurse practitioner, or physician's assistant as appropriate for your state. The level of activity ranges from what is normally expended at home or at school to strenuous activity such as hiking and backpacking. Other examples include tour camping, jamborees, and Wood Badge training courses. It is important to note that the height/weight limits must be strictly adhered to if the event will take the unit beyond a radius wherein emergency evacuation is more than 30 minutes by ground transportation, such as backpacking trips, high-adventure activities, and conservation projects in remote areas.

## Risk Factors

Based on the vast experience of the medical community, the BSA has identified that the following risk factors may define your participation in various outdoor adventures.

- Excessive body weight
- Heart disease
- Hypertension (high blood pressure)
- Diabetes
- Seizures
- Lack of appropriate immunizations
- Asthma
- Sleep disorders
- Allergies/anaphylaxis
- Muscular/skeletal injuries
- Psychiatric/psychological and emotional difficulties

For more information on medical risk factors, visit Scouting Safely on [www.scouting.org](http://www.scouting.org).

## Prescriptions

The taking of prescription medication is the responsibility of the individual taking the medication and/or that individual's parent or guardian. A leader, after obtaining all the necessary information, can agree to accept the responsibility of making sure a youth takes the necessary medication at the appropriate time, but BSA does not mandate or necessarily encourage the leader to do so. Also, if state laws are more limiting, they must be followed.

For frequently asked questions about this Annual Health and Medical Record, see Scouting Safely online at <http://www.scouting.org/scoutsource/HealthandSafety.aspx>. Information about the Health Insurance Portability and Accountability Act (HIPAA) may be found at <http://www.hipaa.org>.



BOY SCOUTS OF AMERICA.

# Annual BSA Health and Medical Record

## Part A

### GENERAL INFORMATION

Name \_\_\_\_\_ Date of birth \_\_\_\_\_ Age \_\_\_\_\_ Male  Female   
 Address \_\_\_\_\_ Grade completed (youth only) \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Unit leader \_\_\_\_\_ Council name/No. \_\_\_\_\_ Unit No. \_\_\_\_\_  
 Social Security No. (optional; may be required by medical facilities for treatment) \_\_\_\_\_ Religious preference \_\_\_\_\_  
 Health/accident insurance company \_\_\_\_\_ Policy No. \_\_\_\_\_

**ATTACH A PHOTOCOPY OF BOTH SIDES OF INSURANCE CARD (SEE PART C). IF FAMILY HAS NO MEDICAL INSURANCE, STATE "NONE."**

### In case of emergency, notify:

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_  
 Home phone \_\_\_\_\_ Business phone \_\_\_\_\_ Cell phone \_\_\_\_\_  
 Alternate contact \_\_\_\_\_ Alternate's phone \_\_\_\_\_

### MEDICAL HISTORY

Are you now, or have you ever been treated for any of the following:

Yes	No	Condition	Explain
		Asthma	
		Diabetes	
		Hypertension (high blood pressure)	
		Heart disease (i.e., CHF, CAD, MI)	
		Stroke/TIA	
		COPD	
		Ear/sinus problems	
		Muscular/skeletal condition	
		Menstrual problems (women only)	
		Psychiatric/psychological and emotional difficulties	
		Learning disorders (i.e., ADHD, ADD)	
		Bleeding disorders	
		Fainting spells	
		Thyroid disease	
		Kidney disease	
		Sickle cell disease	
		Seizures	
		Sleep disorders (i.e., sleep apnea)	
		GI problems (i.e., abdominal, digestive)	
		Surgery	
		Serious injury	
		Other	

### Allergies or Reaction to:

Medication \_\_\_\_\_

Food, Plants, or Insect Bites \_\_\_\_\_

### Immunizations:

The following are recommended by the BSA. Tetanus immunization must have been received within the last 10 years. If had disease, put "D" and the year. If immunized, check the box and the year received.

Yes	No	Date
<input type="checkbox"/>	<input type="checkbox"/>	Tetanus _____
<input type="checkbox"/>	<input type="checkbox"/>	Pertussis _____
<input type="checkbox"/>	<input type="checkbox"/>	Diphtheria _____
<input type="checkbox"/>	<input type="checkbox"/>	Measles _____
<input type="checkbox"/>	<input type="checkbox"/>	Mumps _____
<input type="checkbox"/>	<input type="checkbox"/>	Rubella _____
<input type="checkbox"/>	<input type="checkbox"/>	Polio _____
<input type="checkbox"/>	<input type="checkbox"/>	Chicken pox _____
<input type="checkbox"/>	<input type="checkbox"/>	Hepatitis A _____
<input type="checkbox"/>	<input type="checkbox"/>	Hepatitis B _____
<input type="checkbox"/>	<input type="checkbox"/>	Influenza _____
<input type="checkbox"/>	<input type="checkbox"/>	Other (i.e., HIB) _____

Exemption to immunizations claimed.

### MEDICATIONS

List all medications currently used. (If additional space is needed, please photocopy this part of the health form.) Inhalers and EpiPen information must be included, even if they are for occasional or emergency use only.

**(For more information about immunizations, as well as the immunization exemption form, see Scouting Safely on Scouting.org.)**

Medication _____ Strength _____ Frequency _____ Approximate date started _____ Reason for medication _____ _____ Distribution approved by: _____ Parent signature _____ MD/DO, NP, or PA Signature Temporary <input type="checkbox"/> Permanent <input type="checkbox"/>	Medication _____ Strength _____ Frequency _____ Approximate date started _____ Reason for medication _____ _____ Distribution approved by: _____ Parent signature _____ MD/DO, NP, or PA Signature Temporary <input type="checkbox"/> Permanent <input type="checkbox"/>	Medication _____ Strength _____ Frequency _____ Approximate date started _____ Reason for medication _____ _____ Distribution approved by: _____ Parent signature _____ MD/DO, NP, or PA Signature Temporary <input type="checkbox"/> Permanent <input type="checkbox"/>
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**NOTE: Be sure to bring medications in the appropriate containers, and make sure that they are NOT expired, including inhalers and EpiPens. You SHOULD NOT STOP taking any maintenance medication.**

Emergency contact No.:

Allergies:

DOB:

Last name:

**Part B**

**PHYSICAL EXAMINATION**

Height \_\_\_\_\_ Weight \_\_\_\_\_ % body fat \_\_\_\_\_ Meets height/weight limits  Yes  No  
 Blood pressure \_\_\_\_\_ Pulse \_\_\_\_\_

**Individuals desiring to participate in any high-adventure activity or event in which emergency evacuation would take longer than 30 minutes by ground transportation will not be permitted to do so if they exceed the height/weight limits as documented in the table at the bottom of this page or if during a physical exam their health care provider determines that body fat percentage is outside the range of 10 to 31 percent for a woman or 2 to 25 percent for a man. Enforcing this limit is strongly encouraged for all other events, but it is not mandatory. (For healthy height/weight guidelines, visit [www.cdc.gov](http://www.cdc.gov).)**

	Normal	Abnormal	Explain Any Abnormalities	Range of Mobility	Normal	Abnormal	Explain Any Abnormalities
Eyes				Knees (both)			
Ears				Ankles (both)			
Nose				Spine			
Throat							
Lungs				<b>Other</b>	<b>Yes</b>	<b>No</b>	
Heart				Contacts			
Abdomen				Dentures			
Genitalia				Braces			
Skin				Inguinal hernia			<b>Explain</b>
Emotional adjustment				Medical equipment (i.e., CPAP, oxygen)			
Tuberculosis (TB) skin test (if required by your state for BSA camp staff)				<input type="checkbox"/> Negative <input type="checkbox"/> Positive			

**Allergies** (to what agent, type of reaction, treatment): \_\_\_\_\_

I certify that I have, today, reviewed the health history, examined this person, and approve this individual for participation in:

- Hiking and camping     Competitive activities     Backpacking     Swimming/water activities     Climbing/rappelling
- Sports     Horseback riding     Scuba diving     Mountain biking     Challenge ("ropes") course
- Cold-weather activity (<10°F)     Wilderness/backcountry treks

Specify restrictions (if none, so state) \_\_\_\_\_

**Certified and licensed health-care providers recognized by the BSA to perform this exam include physicians (MD, DO), nurse practitioners, and physician's assistants.**

- To Health Care Provider:** Restricted approval includes:
- Uncontrolled heart disease, asthma, or hypertension.
  - Uncontrolled psychiatric disorders.
  - Poorly controlled diabetes.
  - Orthopedic injuries not cleared by a physician.
  - Newly diagnosed seizure events (within 6 months).
  - For scuba, use of medications to control diabetes, asthma, or seizures.

Provider printed name \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

City, state, zip \_\_\_\_\_

Office phone \_\_\_\_\_

Date \_\_\_\_\_

Height (inches)	Recommended Weight (lbs)	Allowable Exception	Maximum Acceptance
60	97-138	139-166	166
61	101-143	144-172	172
62	104-148	149-178	178
63	107-152	153-183	183
64	111-157	158-189	189
65	114-162	163-195	195
66	118-167	168-201	201
67	121-172	173-207	207
68	125-178	179-214	214
69	129-185	186-220	220

Height (inches)	Recommended Weight (lbs)	Allowable Exception	Maximum Acceptance
70	132-188	189-226	226
71	136-194	195-233	233
72	140-199	200-239	239
73	144-205	206-246	246
74	148-210	211-252	252
75	152-216	217-260	260
76	156-222	223-267	267
77	160-228	229-274	274
78	164-234	235-281	281
79 & over	170-240	241-295	295

This table is based on the revised Dietary Guidelines for Americans from the U.S. Dept. of Agriculture and the Dept. of Health & Human Services.

**Part B**    **Last name:** \_\_\_\_\_    **DOB:** \_\_\_\_\_

**Part C**

**Informed Consent and Hold Harmless/Release Agreement**

I understand that participation in Scouting activities involves a certain degree of risk. I have carefully considered the risk involved and have given consent for myself and/or my child to participate in these activities. I understand that participation in these activities is entirely voluntary and requires participants to abide by applicable rules and standards of conduct. I release the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity from any and all claims or liability arising out of this participation.

I approve the sharing of the information on this form with BSA volunteers and professionals who need to know of medical situations that might require special consideration for the safe conducting of Scouting activities.

In case of an emergency involving me or my child, I understand that every effort will be made to contact the individual listed as the emergency contact person. In the event that this person cannot be reached, permission is hereby given to the medical provider selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for me or my child. Medical providers are authorized to disclose to the adult in charge Protected Health Information/ Confidential Health Information (PHI/CHI) under the Standards for Privacy of Individually Identifiable Health Information, 45 C.F.R. §§160.103, 164.501, etc. seq., as amended from time to time, including examination findings, test results, and treatment provided for purposes of medical evaluation of the participant, follow-up and communication with the participant's parents or guardian, and/or determination of the participant's ability to continue in the program activities.

- Without restrictions.
- With special considerations or restrictions (list) \_\_\_\_\_

I hereby assign and grant to the local council and the Boy Scouts of America the right and permission to use and publish the photographs/ film/videotapes/electronic representations and/or sound recordings made of me or my child at all Scouting activities, and I hereby release the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity from any and all liability from such use and publication.

I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage, and/or distribution of said photographs/ film/videotapes/electronic representations and/or sound recordings without limitation at the discretion of the Boy Scouts of America, and I specifically waive any right to any compensation I may have for any of the foregoing.

- Yes  No

Adults authorized to take youth to and from the event: (You must designate at least one adult. Please include a telephone number.)

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Adults NOT authorized to take youth to and from the event:

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**I understand that, if any information I/we have provided is found to be inaccurate, it may limit and/or eliminate the opportunity for participation in any event or activity.**

Participant's name \_\_\_\_\_

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

Parent/guardian's signature \_\_\_\_\_  
(if under the age of 18)

Date \_\_\_\_\_

**Attach copy of insurance card (front and back) here. If required by your state, use the space provided here for notarization.**



BOY SCOUTS OF AMERICA  
1325 West Walnut Hill Lane  
P.O. Box 152079  
Irving, Texas 75015-2079  
<http://www.scouting.org>

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**Part C** Last name: \_\_\_\_\_ DOB: \_\_\_\_\_