



BOY SCOUTS  
OF AMERICA  
RIOGRANDE COUNCIL

# 2024 WINTER CAMP

A complete guidebook for unit leaders,  
scouts and parents.

RIOGRANDECOUNCIL.ORG

Dear Scouter,

The number of Scouts achieving the Eagle rank has increased dramatically since the Rio Grande Council added Winter Camp to its rich tradition of quality programs. Scouters who have participated in past Winter Camps can feel proud of having been a part of this great achievement. We can't emphasize enough what a great opportunity Winter Camp represents toward keeping our scouts on their Trail to Eagle all at an affordable price.

This year we celebrate our 31st Winter Camp and 116 years of Scouting!!! On behalf of the Rio Grande Council and the Winter Camp Committee we would like to extend a cordial invitation to all troops and a big thanks to all who have contributed with their time and effort to make Winter Camp the great experience it is. Last year's Winter Camp was a success, and we are looking forward to ANOTHER Great Winter Camp Again..

This year's Winter Camp will be a Short Term Camp. All classes will be held at Camp Perry and will start at 1:00 pm on Thursday, December 26, 2024 and we're ending camp on Friday, December 29, 2023 after 2nd Period with a 1:00 pm departure (or earlier) time allowing everyone to make it home in time to enjoy the end of year. The gates will open at 10:00 am Thursday December 26, 2024—Leaders/SPL Meeting at 12:00 pm in Gym. On December 26, 2024—3rd, 4th and 5th Period classes will take place and only 1st and 2nd Period classes will take place on December 29, 2024

Please read this Leaders' Guide thoroughly, since changes have been made. Troops attending should register as soon as possible since class space is limited.

ALL SCOUT LEADERS NEED TO COMPLETE THE ADULT LEADER PARTICIPATION APPLICATION BY Wednesday DECEMBER 9, 2024. PLEASE EMAIL OR FAX TO THE SCOUT OFFICE at 956-421-4950

Winter Camp is an All-Volunteer run camp put on by the Rio Grande Council. With the assistance of qualified adult leaders, scouts and merit badge counselors, we can offer a quality program with counselors that have the required expertise for the subjects they are teaching. If you would like to teach a merit badge or have any ideas how to enhance the program, please let us know as soon as possible via the e-mails listed below. Contact Oscar Garza at (956) 624-7610 or email him at [cholrep@yahoo.com](mailto:cholrep@yahoo.com) if you want to be a Winter Camp Volunteer. We want to hear from all of you. Registered troops will be notified of any changes to the program. An updated Merit Badge Schedule will be posted to the website with available course offerings as we get closer to the event.

We hope this information will be helpful and we look forward to seeing you and your troop at Winter Camp 2024.

Yours in Scouting,  
Oscar R. Garza  
Winter Camp Director  
[cholrep@yahoo.com](mailto:cholrep@yahoo.com)  
956-624-7610

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[Luis.Rodriguez@scouting.org](mailto:Luis.Rodriguez@scouting.org)  
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# General Information



## PARENTS / VISITORS

In effort to keep accurate records of Scouters at CAMP PERRY, and ensure Scout safety, individuals are not permitted on camp property without prior authorization. The Texas legislature has enacted the [Texas Youth Camp Safety and Health Act](#) that requires the council to conduct a criminal background check and sex offender database check on every adult who will be at camp. All adults attending camp in any capacity must complete an Adult in Camp Compliance (ACC) form a minimum of two weeks before camp, to allow sufficient time for the background checks to be completed. Completing this form allows the council office staff to complete a criminal background check on each adult in camp (regardless of time spent in camp). Visitors should also complete an ACC form; persons who have not completed an ACC form will have to be escorted by an adult the entire time they are on camp property and will only be permitted to enter camp if someone is available to escort them. Please take a photo or screenshot of the receipt for documentation of when you submitted your form

## UNIFORMS

Please be in full official Scout uniform (all Scouts and adult leaders) for only Morning/Evening Flag Ceremonies and each evening meal. Activity shirts, i.e. Winter Camp T-Shirt, may be worn all other times.

## COMMUNICATION WITH SCOUTS

We ask parents not to call their Scout except in the case of emergency. It's a good idea to contact the Unit Leader before contacting a Scout. In an attempt to discourage homesickness, we ask that you tell your Scout to not call home. Our experience shows that a homesick Scout doesn't improve if they call home.

## VEHICLES IN CAMP

Vehicles are only allowed in the camping area to deliver equipment upon arrival to camp. All vehicles must be moved to the parking lot immediately after unloading so that others arriving have the same convenience. Do not wait to move your vehicle - campsites should be set up only after vehicles have been moved to the parking area.

## FOOD ALLERGIES | DIETARY NEEDS

Any dietary restrictions or requests must be submitted on registration by December 9, 2024. Please contact Oscar R. Garza directly for any special food requests at (956) 624-7610 or [cholrep@yahoo.com](mailto:cholrep@yahoo.com). While accommodations will be met to the best of the program's ability, Kosher/Vegan/Vegetarian diets should consider bringing items that will fulfill their scouts appetite throughout the course of the week.

## SUPPLIES

Additional items such as trash bags, toilet paper, twine, brooms, water hoses and fire buckets may be checked out by contacting the Quartermasters.



# CAMP AMENITIES

## CAMPSITES

All campsites have a fire ring. The C.O.P.E. Course campsite provides primitive camping and modern restrooms at the South Latrines. The buildings and developed areas of the Camp Perry provide 19 campsites, select sites complete with platform tenting or pavilions, in close proximity to the central Dining Hall.

## CAMP TRADING POST

The Trading Post will be open to serve items such as elotes, candy, cold drinks, and dry snacks. Various handicraft items will be offered along with T-shirts, mugs, patches and literature including some merit badge pamphlets for the merit badges being offered in the Winter Camp Program.

Hours of Operation: THU FRI SAT SUN

Accepted forms of payment: Cash, Debit Card, Credit Card

## O.A. LODGE / SCOUTMASTERS LOUNGE

Adult leaders are invited here to take a break during the program day. Leaders can enjoy our Scoutmaster Lounge which offers air-conditioning, WIFI (for adults only). This is a great place to relax or get caught up on any work you may need to take care of.

## DINING HALL

All meals are provided by adult cooks and served (cafeteria style) by our youth staff. Well-planned meals provide a balanced diet and seconds are usually available. For Scouts with special dietary needs, send an email noting limitations to Cholrep@yahoo.com by December 9th 2024.

The first meal of camp will be dinner on Thursday December 26, 2024. The last meal will be Lunch with a scheduled a 5:00 pm (or earlier) Departure on Sunday December 30, 2024.

## SHOOTING RANGES

Rifle, Archery, and Shotgun have been designed and certified by BSA standards. The camp furnishes .22 caliber rifles for use on the rifle range, 20 gauge shotguns for use on the Skeet range, and recurve bows for use on the Archery range.



## GENERAL CAMP FACILITIES INCLUDE:

Dining Hall  
Health and Fitness Center  
Trading Post  
STEM Building  
Order of the Arrow Lodge  
Archery Range  
Rifle Range  
Shotgun Range  
Fishing Dock  
Aquatics Dock  
Swimming Pool  
ADA Campsite  
Shower / Latrine Facilities  
Gaga Ball Pit  
OA Ceremonial  
Amphitheater  
Quartermaster's Facility  
Basketball Court  
BMX Course

## NATIONAL CAMP STANDARDS

Camp Perry scout reservation is inspected annually by a team that represents the Boy Scouts of America. The camp meets or exceeds all standards and regulations. We are also inspected regularly by the Texas Health Department. We feature a Health Lodge staffed by qualified professional provider for routine health checks and problems. Strict health and safety standards are maintained at all times.

# How To Register Your Troop

Registration for Summer Camp is done online at [\[CLICK HERE\]](#). A \$50.00 per Troop deposit is required to reserve a slot. The site accepts all major credit cards and also accepts e-checks. Please have only one person per unit handle the registration process to avoid duplication of registrations and other common admin problems.

\$ 99.00 per Scout before December 9th, 2024 / midnight deadline

\$ 65.00 per Adult before December 9th, 2024 / midnight deadline

(Fee includes all meals, a Winter Camp Item and Patch)

- After December 9th, 2024, a \$55 Administrative Late Fee will be imposed on all registrations.
- NO Walk-in Registrations will be accepted.
- All fees must be paid on-line prior to the start of camp.

Campsites are assigned based on Troop size and need. You will receive your campsite assignment at check in . For assistance, email [Cholrep@yahoo.com](mailto:Cholrep@yahoo.com).

## HOW TO PREPARE FOR CAMP

- Know each Scout's advancement status before coming to camp.
- Encourage work on prerequisites before coming to camp.
- Set a goal for each Scout - challenge them to do their best.
- Register your Scouts information prior to the registration deadline.
- Collect physicals for all Scouts and adults attending camp early.
- Alert the camp to special needs such as diet, disabilities or medications by December 9, 2024 via email at [cholrep@yahoo.com](mailto:cholrep@yahoo.com).

## LEADERSHIP REQUIREMENTS

No adults will be allowed into camp without a cleared Criminal Background Check conducted by the Rio Grande Council. (Submit no later than December 9, 2024).

All adults attending camp and staying overnight with a troop must comply with the following:

- Be a registered member of the Boy Scouts of America.
- Complete Youth Protection Training (YPT) training and bring a copy of the card.
- Complete Health Form- Part A, B & C (Page 27-30)

Each Troop must have two registered adult leaders in camp at all times. LEADERS MUST BE AT LEAST 21 YEARS OLD. The Boy Scouts of America requires "two deep leadership" for the safety of your Scouts. All Leaders must bring a copy of their Youth Protection Training certificate and a completed Health Form. We recommend a ratio of 8 scouts or less per leader.

## CAMP STAFF

Camp Perry is always looking for great people that live by the Scout Oath to fill several positions at camp. Our staff is selected for their enthusiasm and knowledge. We reinforce that knowledge with regular training sessions prior to the camping season and create a sense of team spirit that is carried over to the Scouts visiting our camp. We are not successful unless you are satisfied with our program. We make every effort to provide the quality learning environment you expect at Camp Perry. Anyone interested in teaching a merit badge class or helping out in another capacity can contact the Winter Camp Director, Oscar Garza at [cholrep@yahoo.com](mailto:cholrep@yahoo.com) or call (956) 624-7610 to volunteer.

All volunteer instructors must be State of Texas Youth Protection Certified, have a Criminal Background Check for 2024 performed through our system, and be a registered adult leader.

# CHECK-IN

## **CHECK IN TIME BEGINS AT 10:00A.M.**

Check-in is completed at the health & fitness building before your troop has received their campsite assignment.

Camp staff will be checking in units after 10:00 am on Thursday December 26, 2024. A Troop Guide, will inform leaders of the check-in procedure. Please plan your arrival at Camp Perry as close as possible to check-in on time. There will be an ADULT LEADERS/SPL MEETING AT 12:00 PM IN THE GYM. First merit badge class begins promptly at 1:00 pm.

Early arrivals are asked to wait in the parking lot area with their adult supervision until the check-in process begins. Any maverick scouts should be accompanied by an adult until the scout is checked in and given their campsite assignment. Campsites are assigned based on Troop size and need. You will receive your campsite assignment at check. For assistance, email [Cholrep@yahoo.com](mailto:Cholrep@yahoo.com).

Wrist Bands will be provided for all attendees. Leaders, Scouts and guests arriving/leaving camp during the week must stop at the camp office to sign in or out. Any changes to campsite adult leadership must be provided to the Camp Director when it occurs. This allows staff to account for all persons on site in case of an emergency.

## **MEDICATIONS**

All medications brought to camp will be kept in the Health Lodge. Medication will be checked in with the Health Officer, who will see that medications are made available to campers at the prescribed times. It is the scouts responsibility check in with Camp Health Officer for medication distribution. Be sure that medications are clearly labeled with camper's name and troop number on each container. No medications will be kept in campsites, other than those approved by the Camp Health Officer.

## **CHECK-IN REQUIREMENTS**

- ALL YOUTH AND ADULTS MUST BE REGISTERED WITH BSA.
- TWO (2) COPIES OF UNIT'S BSA ID CARDS
- BSA HEALTH FORM PART A B & C FOR YOUTH AND ADULTS
  - PART A, YOUTH SIGNATURE REQUIRED
  - PART A, PARENT SIGNATURE REQUIRED
  - PART C, DOCTORS SIGNATURE REQUIRED
- A PRINTED COPY OF EACH ADULTS YPT CERTIFICATE
- OUT OF COUNCIL TROOPS WILL NEED PROOF OF INSURANCE.

## **CAMP DIRECTORS TIPS**

- Make sure your parents have signed the medical forms and accompanying notes before you get to camp.
- Photocopy forms and keep the originals in a safe space at home
- Keep an extra copy of special dietary & medical needs roster with a unit adult leader for quick reference while at camp.

## **Check out**

Departure is scheduled for Sunday, December 30, 2024 at 1:30 pm (or earlier). **NO BREAKFAST WILL BE SERVED ON DECEMBER 29, 2024!**

Each troop is expected to complete a camp clean up assignment before check out can be started. This area will be assigned to your troop on Friday. Please speak with office staff if you have not received this assignment.

Each troop is expected to return all camp provided items to the Quartermaster. These items include tools. Flags, water jugs, etc, that are used during the week in your campsite or for service projects. Any items missing will be accounted for before a troop is allowed to check out.

A final campsite inspection will be made to insure no waste articles are left for the next occupants to clean up.

All Medical forms will be returned at check-out time. If a medical binder is left behind, please note that administrative staff will destroy all documentation to prevent violation of HIPAA laws.



## REGISTRATION NO-SHOW'S

For compliance in the protection of all campers pre-registered to attend Camp Perry the following procedures will be followed:

- Scoutmasters are asked to verify any “no shows” from their attendance roster turned in prior to arrival at camp. This may be done at a Leader’s Meeting or via e-mail.
- If there are “no shows” the Scoutmaster must provide written explanation of “no shows” from information he has concerning the Scout.
- If the Scoutmaster is unaware he must investigate the reason for the “no show(s)” and then prepare a written explanation within 24 hours and submit to the Camp Director.

Please see our [Refund Policy](#) for protocols on how to request registration refunds from Rio Grande Council.

## LEADER’S MEETING

There will be an adult leaders’ meeting the first afternoon Thursday Dec. 26, 2024 at 12:00 pm in the gym because 3rd, 4th and 5th Period classes start that day.

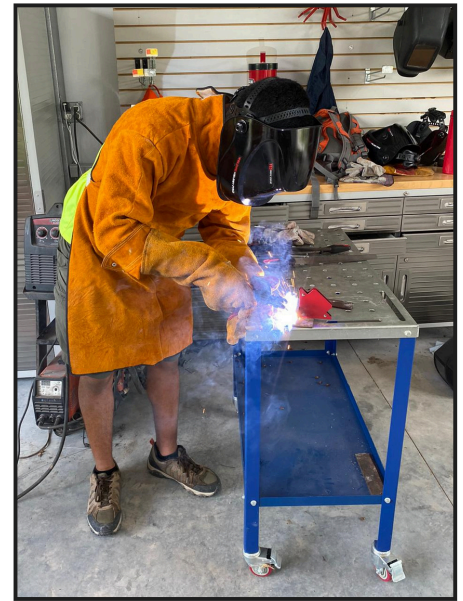
All ADULT LEADERS/SPL’S are required to attend the meeting, keeping in mind that scouts should not be left without any adult supervision. Additional rules and guidelines not listed in this Leaders’ Guide will be covered. Class rosters will be passed out to those who have volunteered to teach Merit Badge classes. Merit Badge Class changes will be discussed. While every effort is made to keep this to a minimum, there may be some classes without assigned merit badge counselors. At that time, we will ask for volunteers to teach these classes. Volunteer merit badge counselors should come prepared to teach the basic requirements of their assigned classes.

Any last minute volunteers will gain access to the office computer and other resources as needed in order to prepare for their classes. Other leaders’ and/or SPL meetings will be scheduled as needed. All those adult leaders/scouters need current Texas YPT.



# DAILY PROGRAM SCHEDULE

	THURS	FRI	SAT	SUN
6:45		Flags		
7:00		Breakfast		
7:45				
8:15		Merit Badge Session 1		
9:45				
10:00	Arrive at Camp Check In begins at 10:00AM	Merit Badge Session 2		
11:30				
11:45		Lunch	Check Out Begins at 1:30PM	
12:45				
1:15	Merit Badge Session 3			
2:45				
3:00	Merit Badge Session 4			
4:30				
4:30	Special Programs			
5:30				
5:30	Flags / Dinner			
6:45				
7:00	Merit Badge Session 5			
8:30				
8:30	Study Hall / Cracker Barrel			
9:45				
10:00	Lights Out			







# MERIT BADGE SCHEDULE

	8:15	10:00	1:15	3:00	7:00
1st Year Program	Path to First Class 1	Path to first class 2			
Eagle Required	Communications Public Speaking Personal Fitness	Cit. in the Community	Cit. In the Nation Personal Management	Cit. in the World	Cit. In Society
Shooting Sports	Archery	Shotgun 1	Shotgun 2	Rifle	
Handicrafts				Woodwork	Sculpture
Nat-E-Con	Bird Study Soil & Water Conservation	Environmental Science	Insect Study Weather	Nature	Astronomy Reptile/Amphibian
Scout Craft	First Aid Pioneering	Cooking Wilderness Survival Orienteering	Fire Safety	Cooking Emergency Preparedness	Backpacking Camping First Aid
Occupational	Crime Prevention Fingerprinting Law	Engineering Plumbing Safety Traffic Safety	Automotive Maintenance Electricity Home Repairs	Electronics Welding	America Labor Architecture Medicine Photography
Other	Athletics	Music Sports	Nuclear Science Theater	Chemistry Composite Materials Collections Disability Awareness	Chess Digital Technology Scouting Heritage



# MERIT BADGE SIGN-UP

Registration for Merit Badges should take place prior to your arrival at camp. Upon check in at camp, copies of each Scout's Daily Schedule will be given to his Scoutmaster. A copy will be maintained in the camp office. Any last-minute changes will take place after the Thursday December 26, 2024 ADULT LEADER/SPL Meeting in the office. Leaders will be required to submit a schedule change form on behalf of their scouts. If it becomes necessary to limit classes, higher rank Scouts will be given preference on all Eagle required merit badge offerings

Camp Perry uses an online merit badge system that makes scheduling easy. The Scoutmaster should counsel each Scout to determine which merit badges he should select and identify any requirements of those selections he should complete prior to Winter Camp in order to insure completion at camp. Most of the Eagle required Merit Badges require extra time. Some cannot be completed until after the Scout fulfills requirements following Winter Camp. Be sure your Scouts have enough free time to keep up with their studies and still have time for some fun.

Be sure to read the following information before you sign up online and remember that on line Merit Badge Sign-ups go live.

- Each Merit Badge requires one block with the exception of the Path to First and Target & Range Classes, which requires additional blocks.
- Adult BSA Training sign-up is done at camp.

## CLASSES AND ACTIVITIES

Our counselors will only sign off on completed merit badges when the merit badges are earned. In some cases, partials cannot be avoided. The time to resolve questions is when counselors are available, and participants are present to discuss discrepancies, We do not expect to modify our records at a later date.

There is always something to do at Camp Perry Winter Camp. See the variety of Merit Badge classes, scheduled classes, and free-time activities below, and use the classes and program schedule to plan your winter adventure.

## PATH THE FIRST CLASS PROGRAM

The "Path To First Class" is open to any scout needing assistance in gaining the First Class Rank. Camp Perry Winter Camp will offer "Path To First Class," for 2 hours each day. This should assist in jump starting those Scouts needing the Rank Advancement. It also allows the Scout to take additional merit badge classes as well.

We encourage all Scouts to learn basic skills in an environment of fun and cooperation. Teamwork is emphasized along with team spirit. We encourage all leaders to get involved in this program.

## CAMP DIRECTOR'S NOTE:

We encourage you to test their skills from what they've learned, however require troop leadership to sign their handbooks. If your Scout completed the swimming merit badge they also completed the rank requirements associated with swimming. Likewise, First-aid instruction includes only those skills necessary to achieve rank. Though some skills can be applied toward the First Aid Merit Badge, the topics covered in the Path to First Class Program will not satisfy them all unless Scouts choose and attend First Aid as their elective class.



## HELPFUL HINTS FOR MERIT BADGES

Many of the Merit Badges can be completed at winter camp. However, some have time requirements, special projects/visitations, special skill levels or other prerequisites so they cannot be completed at winter camp. Attendance at Merit Badge instruction sessions, and projects associated with them, is necessary to complete the badges. If a Scout finds it necessary to miss a session for valid reasons, he should work with the instructor to compensate for the lost time. Please make sure your Scouts understand that all merit badges may not be completed at winter camp. Encourage them to choose a variety of merit badges so they have a fun experience. We want happy campers!



## MERIT BADGE COMPLETION REPORTS

Each troop is responsible for reviewing the computer generated Merit Badge completion list on Sunday before unit departure. These reports are available under your units group registration via Doubleknot. The time to resolve questions is when counselors are onsite, still available, and participants are present to discuss discrepancies. We do not expect to modify our records at a later date.

WITH PERFECT ATTENDANCE THROUGHOUT THE WEEK, PATH TO FIRST CLASS WILL COMPLETE THE FOLLOWING REQUIREMENTS:

### SCOUT

1 a, 1 b, 1 c, 1 d, 1 e, 1 f, 2a, 2b, 2c, 2d, 3a, 3b, 4a, 5

### TENDERFOOT

3a,3b,3c,3d,4a,4b,4c,Sa,Sb,Sc,7a,7b,8

### SECOND CLASS

1 b, 1 c, 2a, 2b, 2c, 2f, 2g, 3a, 3b, 3c, 3d, 4,6a,6b,6c,6d,6e,8a,8b,9a,9b

### FIRST CLASS:

1b,3a,3b,3c,3d,4a,Sa,Sb,Sc,Sd,7a,7b,7c, 7d, 7e,7f

### MERIT BADGE HANDBOOKS & WORKSHEETS

All merit badge booklets need to be purchased in advance at the Scout Office in Harlingen, Texas. Some booklets may be available at the camp. Please note that the Rio Grande Council store is closed for inventory in late December and will not be open during the week of Winter Camp. Be Prepared and make your purchases early. Scouts should be prepared for their classes and bring Merit Badge worksheets with them to camp. Printing services will not be available at camp. Here is the link for the [Merit Badge Worksheets](#).

### BLUE MERIT BADGE APPLICATION CARDS AND SUPPLIES

No Blue Cards are required for Winter Camp.

### MERIT BADGE COMPLETIONS / PARTIALS

Requirements are recorded daily in conjunction with attendance. All records will be made available to unit leaders after camp via email in the form of excel spreadsheet. Please allow up to 2 weeks to receive your document. Merit Badge Instructors will not be available for contact once camp has concluded. If there are any concerns regarding completions or partials please speak with office staff prior to departure or collaborate with a registered council Merit Badge Counselor.

### STUDY HALL

Study Hall is to be held at the Dining Hall starting at 8:30pm for Scouts to study, write reports, and prepare for classes. Study Hall ends at 10:00 pm and Lights Out at your Campsite is at 11:00 pm each night.



# Merit Badges & Special Programs

The final listing of merit badges and special programs is contingent on demand and availability of qualified instructors. An final listing of Merit Badges and other special programs will announced at the first Leader's Meeting on Saturday. BE PREPARED. Some Merit Badges may be added or cancelled! Have your scouts plan for alternative classes. Class schedule changes can be made at the Health and Fitness Building.

## MERIT BADGES (Eagle Required)

Camping	Cooking
Citizenship in the Community	Emergency Preparedness
Citizenship in the Nation	Environmental Science
Citizenship in the World	First Aid
Citizenship in Society	Personal Fitness
Communications	Personal Management
	Sustainability

## MERIT BADGES (Other)

American Business	Insect Study
Animal Science	Law
Architecture	Medicine
Astronomy	Music
Archery	Nuclear Science
Automotive Maintenance	Orienteering
Collections	Photography
Backpacking	Plant Science
Bugling	Plumbing
Crime Prevention	Public Speaking
Dentistry	Radio
Digital Technology	Rifle Shooting
Disability Awareness	Salesmanship
American labor	Scholarship
Electricity	Shotgun Shooting
Electronics	Soil & Water Conservation
Engineering	Sports
Fingerprinting	Traffic Safety
Chess	Weather
Coin and Stamp Collecting	Welding
Geocaching	Wilderness Survival
Athletics	Woodwork





## Special Programs

Shotgun Competition  
 Pioneering Competition  
 Dutch Oven Competition  
 Camp Service Projects

Tote'N Chip  
 Fire'm Chip  
 Camp Relay  
 Branding (Thursday 4:30PM)

## Optional Training

Scouts and leaders not attending Camp Perry Winter Camp may participate in these classes by special appointment only. Contact the Camp Director at least 1-week before the class via email at [cholrep@yahoo.com](mailto:cholrep@yahoo.com)

### TRAINER'S EDGE

Trainer's EDGE is designed to help Scouters (adult & youth) understand the EDGE (Explain, Demonstrate, Guide, Enable) training model and gain self-confidence through hands-on training experiences. Presenters of all levels and skills are welcome and expected to attend. This training does not have an expiration date; practice makes for a more knowledgeable and experienced trainer.

### SCOUTMASTER SPECIFIC TRAINING (CLASSROOM)

The purpose of Scoutmaster Position-Specific training is to provide an active, fun, and positive learning experience for new and experienced Scoutmasters to learn and apply proven techniques or running an effective Boy Scout troop. Any registered adult may complete this course.

### INTRODUCTION TO OUTDOOR LEADERSHIP SKILLS (CLASSROOM)

To safely offer Scouting's outdoor program, you need a certain set of skills and knowledge – and that's why leaders required to take Introduction to Outdoor Leader Skills (also known as "IOLS") Training. You'll learn how to build a fire, use an axe, cook outdoors, use a map and compass, responsibly care for the outdoors, and much more. This course is the classroom portion only. All registered leaders may complete this course.



# WINTER CAMP PACKING LIST

MAKE SURE TO MARK ALL ITEMS WITH SCOUT'S NAME AND UNIT NUMBER

## CAMPING GEAR

Trunk or Footlocker  
Drinking Cup or 2nd Water Bottle  
Daypack  
Twin Size Sheet/ Blanket  
Sleeping Bag  
Pillow  
Cot  
Ground Cloth/Tarp  
Mosquito Net and Frame  
Camp Chair (small/easy to carry)  
Pocket Knife (and Totin' Chip Card)  
Headlamp / Flashlight  
Battery-power fan  
Personal First Aid Kit  
Sunscreen  
Bug Spray

## TOILETRIES

Bath Towels (2)  
(one for aquatics, one for showers)  
Washcloth  
Toilet Paper  
Deodorant  
Comb / brush  
Shower Shoes  
Body-wash  
Shampoo  
Soap  
Toothbrush  
Toothpaste  
Feminine Hygiene  
Shaving  
Chapstick  
Facial wipes  
Hand Sanitizer

## CLOTHING

Full BSA Field Uniform  
OA Sash (OA Members Only)  
Hoodie or Light Jacket  
T-shirts (3 days)  
Shorts or Pants (3 days)  
Socks (3 days)

Thermal Wear  
Flip Flops (shower ONLY)  
Rugged Pants  
Long Sleeve Dry-Fit Shirt  
Work Gloves  
Rain gear/jacket  
Hiking boots  
Hat / cap

## MERIT BADGE ITEMS

Scout Handbook  
Writing Items (pen/pencil/paper)  
MB Pamphlet  
Prerequisites done before camp  
Compass (required for Orienteering MB)  
Personal First Aid Kit (required for First Aid MB)

## SUGGESTED EXTRAS

Collapsible Wagon  
Clothes Hanger for Uniform  
Sunglasses  
Cooling Towel  
Compass  
Bag for laundry  
Spending money for Trading Post  
Camera  
Watch  
Book of Faith  
Extra batteries  
Portable Charger  
Card / Board Games

## LEAVE AT HOME

Sheath knives  
Fireworks  
Skateboards & scooters  
Valuables  
Electronic games  
Pets



## UNIT PACKING LIST

- Unit Roster
- Adult YPT Certificates
- Copy of Insurance (*out of Council units*)
- BSA Health Forms
- Medications
- Signed Permission Slips for Target and Range
- American Flag
- Unit Flag
- Patrol Flags
- Bulletin Board
- First Aid Kit
- Campsite Lighting
- Neon Flagging Tape
- "No Flame" tent signs
- Rope & Twine
- Duct Tape
- Chuck Box
- Dutch Oven
- Cooking Utensils
- Water Cooler
- Merit Badge Pamphlets
- Foot Locker for Valuables
- Dining fly or Canopy
- Foldable Tables
- Collapsible Wagon

## VEHICLES IN CAMP

Vehicles are only permitted in the circular driveway located in front of the Quartermaster Building to deliver troop camping equipment upon arrival to camp. All personal vehicles and troop trailers must be parked in general parking lot at all times. Handicap Licensed Vehicles are to be used as a mode of transportation, not as a carpool or shuttle for able Scouters. Likewise, permitted transportation is for essential locations only, as approved by Camp Director. Individuals needing accommodation, must have a handicap placard or license plate, and notify the Camp Director via email at Cholrep@yahoo.com by DEC 9th.

# CAMP POLICIES

## INTRODUCTION

It is the goal of Camp Perry to provide a safe, quality program to our campers. In addition to the Scout Oath, Scout Law, Guide to Safe Scouting, and Scouting Code of Conduct, the following rules have been established to ensure the continuation of excellent safety record. Leaders are asked to cooperate in observance of these rules and in the common-sense operation of their troop. For the safety and enjoyment of all scouts in camp, troops unwilling to observe camp rules and policies will be asked to leave. Any questions or comments of these rules and policies can be addressed before camp by emailing [cholrep@yahoo.com](mailto:cholrep@yahoo.com). We ask that leaders read all policies and procedures as they may be referred to while at camp and we want to make sure everyone is well informed.

## REGISTRATION

Every youth and adult that attends winter camp must be a registered member of the Boy Scouts of America. BSA Charter Rosters with participants highlighted must be turned in to the front office upon check-in at camp as proof of registration.

## UNIT LEADERSHIP

Each unit must have a minimum of two registered adult leaders 21 years of age or over are required in camp at all times. There must be a registered female adult leader 21 years of age or over present in any unit serving females. The leaders' primary responsibility is the safety of their Scouts, 24 hours a day. Adult leaders are also responsible for the discipline and control of Scouts they bring to camp. Some leaders have a great deal of knowledge of camping, scouting skills or merit badges and are asked to help in program areas.

BCSC is grateful for any adult leader willing to lend a hand with camp programs.

## PARENTS AND VISITORS

In effort to keep accurate records of Scouters at CP, and ensure Scout safety, individuals are not permitted on camp property without prior authorization. All visitors must check in and out at Health and Fitness building. Parents or visitors planning to attend the Friday Family Dinner event must follow the instruction.

The Texas legislature has enacted the Texas Youth Camp Safety and Health Act that requires the council to conduct a criminal background check and sex offender database check on every adult who will be at camp. All adults attending camp in any capacity must complete an Adult in Camp Compliance (ACC) form a minimum of two weeks before camp, to allow sufficient time for the background checks to be completed. Completing this form allows the council office staff to complete a criminal background check on each adult in camp (regardless of time spent in camp). Visitors should also complete an ACC form; persons who have not completed an ACC form will have to be escorted by an adult the entire time they are on camp property and will only be permitted to enter camp if someone is available to escort them. Please take a photo or screenshot of the receipt for documentation of when you submitted your form. For questions, email [Cholrep@yahoo.com](mailto:Cholrep@yahoo.com).

## LEAVING CAMP

Anyone leaving camp must sign out at the Health and Fitness Building. The front gate of CP will be closed at all times. Scouts will not be allowed to leave camp with someone other than their parents or legal guardian and without the approval of the Scoutmaster. Scoutmasters should be advised not to allow Scouts to leave camp.

## TOBACCO/VAPING

Use of Tobacco or vaping products are prohibited on all Rio Grande Council properties.

## HEALTH AND SAFETY

The first aid lodge is available with a qualified health officer on duty 24 hours a day. In addition, CP has an agreement with local physicians and hospitals if additional medical treatment is required. In the case of non-life-threatening injury or illness, the unit leader will be asked to provide transportation to the hospital or clinic as directed. Emergency services will be called in the case of accidents or illness of a more critical nature. There is no charge for medical services performed in camp. All campers needing services from hospitals/clinics are required to handle payment through their insurance policy.

## **INSURANCE**

The Rio Grande Council provides council-wide accident and sickness insurance coverage for all registered Scouts and leaders within the Rio Grande Council. Scouts and leaders from outside the Rio Grande Council must provide certification that they have troop and/or council insurance coverage. It is necessary that your troop be covered by medical insurance at camp. A copy of your certificate of insurance and necessary information for processing a claim must be on file with the camp medical officer before your troop can camp at CP. This allows the CP staff to arrange medical services quickly if needed. If your troop does not have insurance, please contact your local council. A national policy is available at a minimal fee.

## **MEDICAL RE-CHECK**

All Scouts and adult leaders must complete the current Annual Health and Medical Record with parts A, B & C completed within the last 12 months, if staying at camp for any length of time. If a camper arrives at camp without their medical record, it is the camper's responsibility to obtain the physical examination and complete the form before being allowed to participate at camp. During check-in the Camp Health Officer will check each troops roster and medical forms to confirm that all participants are covered. The Health Officer will interview troop leadership to confirm that all campers are in good physical health. The camp retains the right to send Scouts and leaders home if it is deemed that they pose a significant health risk to themselves or others.

## **MEDICATION**

All Prescription Medication must come to camp in the original bottle from the pharmacy.

The Label must Contain:

- The campers name
- Date of prescription
- Doctor's name & phone number
- Correct dosage

No handwriting will be allowed on prescription medication bottles. All over the counter medication must come to camp in the original containers.

The taking of medication is the responsibility of the individual taking the medication and/or their parent/guardian. A Scout leader after obtaining all the necessary information, can agree to accept the responsibility of making sure a Scout takes the necessary medication at the appropriate time.

BSA policy does not mandate nor necessarily encourage the Scout leader to do so. All prescription medication must be accompanied by a note from a parent or guardian giving permission for the medication to be administered by the Scout leader. Medical marijuana/cannabis is not authorized for use by Scouts or leaders during their time at camp.

## **IMMUNIZATIONS**

BSA Rules and Regulations require that all participants have current Tetanus immunization prior to attending summer camp.

## **SCOUT UNIFORM IN CAMP**

Scouts are expected to wear the BSA field uniform to breakfast, morning flags, evening flags, dinner, and to the Friday's closing campfire. Scoutmasters and adult leaders should instruct their troop in how to properly wear the uniform in line with the BSA Guide to Awards and Insignia.

## **SWIMMING ATTIRE**

Swimsuits must be modest. Outside of aquatics areas all campers are required to wear shirts and shorts or pants.

## **FOOTWEAR**

Campers will need sturdy shoes for hiking and a spare pair in case their shoes get wet. No open toed shoes. Water shoes are encouraged for boating areas.

## **EVERYBODY GET A BUDDY**

No Scout should be without a buddy at camp.



## **QUIET HOURS**

Quiet hours are from 10:00PM pm to 6:30am.

## **CAMPSITES & BATHROOMS**

Campsite and bathroom cleanliness are the responsibility of the campers who use them. Any damage done to camp property by campers will be the responsibility of the individual's troop. Campsites may be inspected at any time to ensure the health and safety of all campers.

Few campsites have access to electric outlets. Electric is a shared resource between the troops staying in the campsite and special consideration must be made for campers who require electricity for medical purposes. A Scout is helpful, courteous, and clean, and we ask that troops work together to make sure that restroom facilities are cleaned daily. The camp will supply all necessary items to clean and sanitize restrooms. Before checking out of camp, the camp staff will inspect all facilities to insure they are clean and free of damage.

## **GARBAGE & FOOD IN CAMPSITES**

The Quartermaster Staff will pick up trash nightly before 9:30pm. Bag and place trash on the roadside of the nearest restroom to be collected. No food is allowed inside of tents, food left in campsites must be secured in wildlife-proof container or secured inside a covered trailer CP is in the country where there are raccoons and other smaller animals who will make a mess of unsecured food or garbage.

## **LIVING TREES**

Camp Perry is a showcase of native trees and shrubs of South Texas. Please do not cut live trees and shrubs without permission from the Camp Ranger/Camp Director.

## **PETS/ANIMALS/WILDLIFE**

No pets of any kind may be brought to camp. Wild animals are not to be fed, teased or captured. If there is a wild animal that poses a danger to campers, notify the staff. Please remember that camp is in a natural environment. Snakes or other critters will be spotted. If it does not pose a threat, Scouts and leaders should take the opportunity to view nature from a safe distance and does not warrant notifying camp staff. If an animal is found inside a tent, building or in an area that would put Scouts in harm's way please call the staff to safely remove the animal.

## **VEHICLE POLICY**

The speed limit on the county road which parallels a portion of CP is 30 mile per hour (MPH). The speed limit on roads on camp is 10 MPH with the following exceptions:

1. The speed limit in the Program Valley (the area after the second low water crossing) is 5 MPH.
2. The speed limit in campsite areas is 5 MPH.

It is the policy of the Boy Scouts of America that: Seat belts are required for all occupants in vehicles. The driver of any vehicle operated on camp must be at least 18 years of age. The beds of trucks or trailers, or fenders, must never be used for carrying passengers. Vehicles may be allowed in the campsite to deliver camping equipment on the day of arrival. Troops may leave trailers in campsites. Trailer tow vehicles may also remain in the campsite under the following conditions:

1. The trailer and tow vehicle remain connected throughout the week.
2. Both the trailer and the tow vehicle are at least three feet from the edge of any camp road.
3. The tow vehicle is not moved during the week.

All other vehicles must be removed to a designated parking area for the duration of their visit. Driving in the Campsite areas or Program Valley is not permitted.

## **HANDICAP VEHICLES**

Only vehicles with state issued Disabled Parking placards or license plates may park in designated Disabled Parking spaces. State issued placards are issued as an accommodation for a disability, and therefore should also be noted on the camper's Medical Record. Vehicles are to be used as a mode of transportation, not as a carpool or shuttle for able Scouters. Likewise, permitted transportation is for essential locations only ... not for sightseeing purposes. If transporting a Scout under the age of 18, all Youth Protection Policies must be met. Individuals needing accommodation, must have a handicap placard or license plate, and notify the Camp Director via email at Cholrep@yahoo.com by DEC 9th to ensure the assigned campsite has accessible parking.

## **GATE POLICY**

Perimeter gates **MUST** remain closed at all times – no exceptions. If you find a gate open, close it.

## **EMERGENCY DRILL**

There will be a camp wide emergency drill within the first day of camp. Emergency procedures will be posted on camp bulletin boards in all campsites. As a rule, Scouts and Scouters hearing vehicle horns honking repeatedly must report immediately to the nearest gathering point without delay. Gathering points are:  
Meet at the flag pole closet to Dining Hall.

It is the responsibility of the leaders to make sure the Scouts are aware of what to do during an emergency. Consult the camp map to locate these areas.

## **LOST CAMPERS**

In the event a camper is reported lost, immediately send someone to notify the Camp Director. At the same time, send a Staff member or a reliable camper to the missing camper's campsite, his scheduled activity area for that period as well as any other likely place to determine the accuracy of this report. After these reports have returned negative, and other likely spots have been searched and the Camp Director or his representative has determined that the missing camper will not be found easily, the alarm will be sounded for a Camp-wide Emergency.

If the assembly shows the camper to still be missing, consult with anyone who might have additional knowledge of his whereabouts and send additional searchers to those locations. Additional steps to be taken in sequence are: Arroyo bank search and camp-wide search until missing camper is found or the authorities are notified.

## **PROHIBITED ACTIVITIES**

The following activities are forbidden and violators may be immediately escorted off camp property.

1. Hunting.
2. Unauthorized use of all-terrain vehicles.
3. Pets.
4. Starting fires with gasoline, oil, diesel fuel, lighter fluid, propane, etc.
5. Starting fires outside of designated areas. No flames in tents or cabins, this includes lit mosquito coils, candles & hot plates. Please check with the camp staff to see if any burn bans are in effect before starting a fire. When not in use, all fuel (propane, white gas, etc) must be kept locked up.
6. Towing passengers on sleds, trailers or any other conveyance not intended for such use. No Scouts or leaders may ride in the back of pickup trucks.
7. Firearms and ammunition are available at the camp for use **ONLY** at the rifle and shotgun ranges. No other firearms are permitted on camp property. Do not bring your personal firearms, ammunition or bows.
8. Use of fireworks.
9. Absolutely no alcohol or illegal drugs will be allowed on camp property. Drug and alcohol laws will be strictly enforced according to the laws of the state of Texas. Use of these substances will result in immediate removal from camp.
10. Chainsaws are not allowed at camp unless prior permission is received. National BSA has implemented stringent new rules for their safe use.

## **GENERAL EMERGENCY PROCEDURES:**

1. Report all emergency situations (fires, accidents, etc.) to the nearest Staff member.
2. The Staff member will report directly to the Camp Director, Program Director, or the Camp Ranger.
3. If the situation is evaluated as a **CAMP-WIDE EMERGENCY**, the bell near the Parade Ground will be rung and the camp sirens will be sounded to alert all persons in camp.
4. On hearing the bell and sirens:
  - a. All Staff members will gather at the flagpole on the parade ground.
  - b. All Scoutmasters, troop leaders, and Scouts will report to the flagpole in the center of the parade ground.
  - c. Emergency instructions will be given at the flagpole.
5. Fire:
  - a. Campsite: (Remember to bring a water hose to camp).
    - i. Drop all canvas immediately after checking whether tents are occupied.
    - ii. Notify Camp Director, Program Director, or Camp Ranger immediately.
    - iii. Use water buckets to extinguish fire.

- iv. If help is needed, a camp-wide emergency will be signaled.
- b. Building:
  - i. Evacuate building immediately.
  - ii. Notify Camp Director or Camp Ranger immediately.
  - iii. Stay away from buildings until given further directions by the Camp Director or Camp Ranger.
- c. On Camp property (brush or grass):
  - i. Contact any campsite in path of fire to evacuate site.
  - ii. Notify Camp Director or Camp Ranger immediately.
  - iii. A Camp-wide Emergency will be signaled



GIVE BACK TO YOUR COMMUNITY

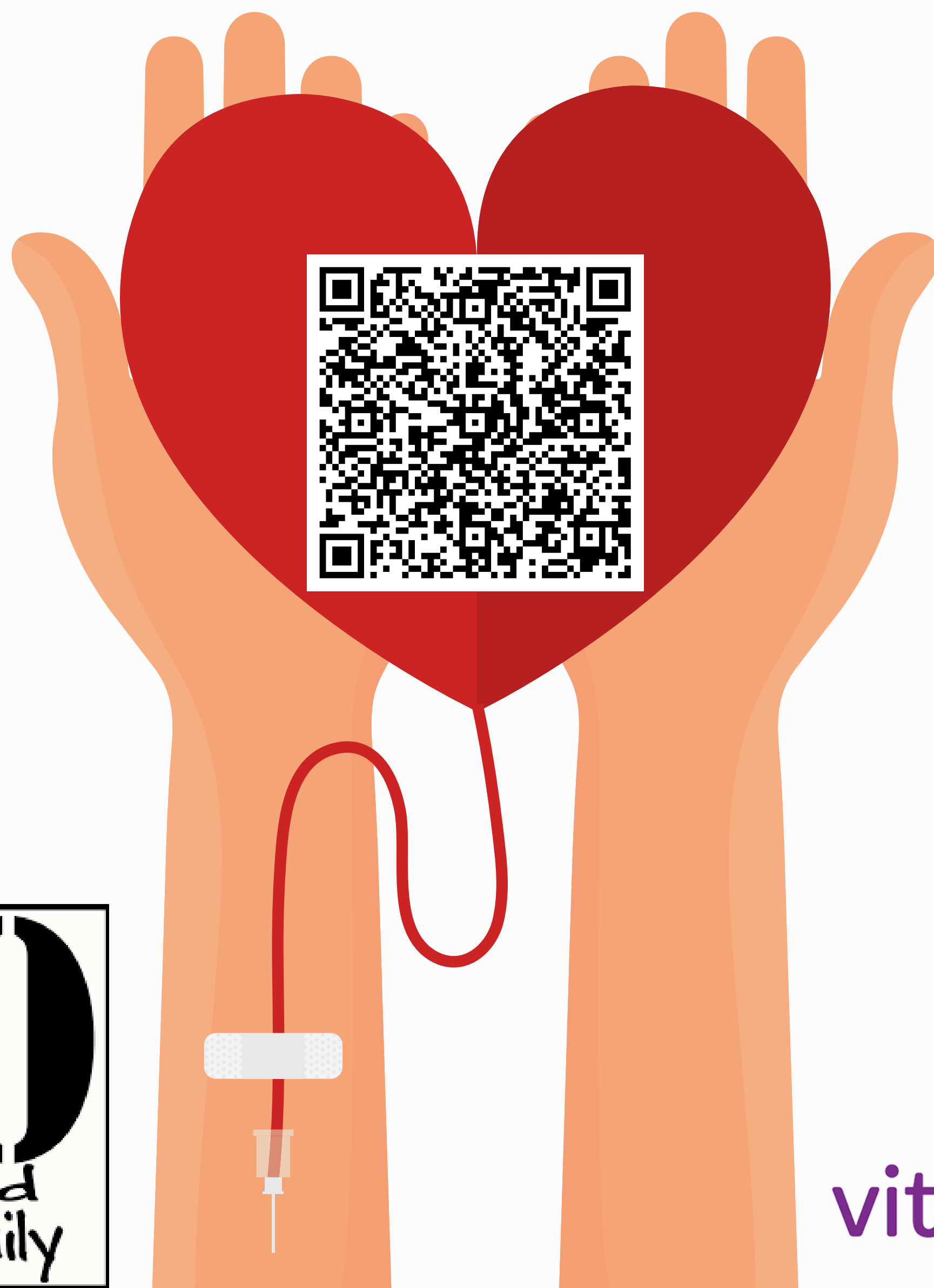
# BSA WINTER CAMP BLOOD DRIVE

at Camp Perry



20 successful donations

Camp Perry will receive 10 Bows for the Cubs



DECEMBER 28, 2024  
10 AM TO 2 PM  
VITALANT MOBILE BUS

Blood Drive: Mobile Unit

Blood Drive ID: 843774

Date/Time: 12/28/2024 10:00 - 14:00

Sched/Goals/Slot 0/12/16

Location: FM 1420

Staff Contact: Roy Hernandez

RIO HONDO, TX, 78583

(956) 975-7806

Site Coordinator: Rolando Hernandez

RHernandez@vitalant.org

Donor Name & Email		Phone Numbers	Donation Type	Blood Type
10:00 AM	1			
10:15 AM	1			
10:30 AM	1			
10:45 AM	1			
11:00 AM	1			
11:15 AM	1			
11:30 AM	1			
11:45 AM	1			
12:00 PM	1			
12:15 PM	1			
12:30 PM	1			
12:45 PM	1			
1:00 PM	1			
1:15 PM	1			
1:30 PM	1			
1:45 PM	1			

# Rio Grande Council Camp

## ADULT LEADER APPLICATION FOR PARTICIPATION

*The Texas legislature has enacted the Texas Youth Camp Safety and Health Act that requires the council to conduct a criminal background check and sex offender database check on every adult who will be at camp. All adults attending camp in any capacity must complete an Adult in Camp Compliance (ACC) form a minimum of two weeks before camp, to allow sufficient time for the background checks to be completed. Completing this form allows the council office staff to complete a criminal background check on each adult in camp (regardless of time spent in camp).*

This form must be filled out *completely* and legibly. This form is **REQUIRED** from all adults over the age of 18 who will attend camp. Please print and use blue or black ink.

First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone #: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Sex: \_\_\_\_\_

Driver License

State: \_\_\_\_\_ DLN#: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

**1. Are you registered with the Boy Scouts of America? \_\_\_\_ Yes \_\_\_\_ NO**

If no, you must complete the registration process **before** attending camp. All participants must attach a copy of their registration card or an *official BSA* copy of the unit roster showing their name as a registered member of that unit.

**2. Have you ever been convicted of a felony or misdemeanor? (You may answer NO if your conviction was ordered sealed, expunged or eradicated) \_\_\_\_ Yes \_\_\_\_ No**

Conviction of a crime is not an automatic bar to participation. All circumstances will be considered, including what you were convicted of and how long ago. You must provide complete information about any conviction by attaching a separate statement.

**3. Is your completed the BSA Online Youth Protection Training course current? \_\_\_\_ Yes \_\_\_\_ NO**

If NO, you **MUST** complete this course and attach a copy of the certificate provided upon successful completion of the training. Training may be completed at the BSA Online Learning Center: <http://myscouting.org> If you have already completed the course, please attach the copy of the certificate to this form.

**4. Personal information provided at the top of the form will be used to conduct a search in the Sex Offender Registration database to meet this state requirement.**

The system used for the criminal background check will also conduct a check in the sex offender database. Both searches will be conducted at one time in our office, so there is no need to attach searches done by the unit.

**5. As of May 16, 2010, ALL adults participating in a licensed youth camp in the state of TX MUST have a criminal background check (conducted annually) in order to determine if any person may be precluded from participation in a state licensed camp based on the results of this check.**

**By signing and submitting this application, you are authorizing a criminal background check and a search in the Sex Offender Registration database of yourself. This check will be made from public record sources. You also confirm that the information provided and attached to this form is true and not falsified in any way.**

**You must also sign the Disclosure & Authorization Form Attached.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**DISCLOSURE/AUTHORIZATION FORM**

**NOTICE TO APPLICANT REGARDING BACKGROUND CHECK**

In order to safeguard the youth in our care, the Boy Scouts of America will procure consumer reports on you in connection with your application to serve as a volunteer, and the Boy Scouts of America may procure additional consumer reports at any time during your service as a volunteer in order to evaluate your continued suitability for volunteer service. The Boy Scouts of America has contracted with LexisNexis, a consumer reporting agency, to provide the consumer reports. LexisNexis may be contacted by mail at LexisNexis, 1000 Alderman Drive, Alpharetta, GA 30005 or by telephone at 800-845-6004.

The consumer reports may contain information bearing on your character, general reputation, personal characteristics, and mode of living. The types of information that may be obtained include but are not limited to Social Security number verification, sex offender registry checks, criminal records checks, inmate records searches, and court records checks. The information contained in these consumer reports may be obtained by LexisNexis from public record sources. **The consumer reports will not include credit record checks or motor vehicle record checks.**

The nature and scope of the consumer reports are described above. Nonetheless, you are entitled to request a complete and accurate disclosure of the nature and scope of such reports by submitting a written request to LexisNexis at the address listed above. Additional notices for applicants in California, New York, Minnesota, and Oklahoma are provided.

**APPLICANT'S ACKNOWLEDGMENT AND AUTHORIZATION**

I have carefully read this notice and authorization form and I hereby authorize the Boy Scouts of America and LexisNexis to procure a consumer report, which as described above will include information relating to my criminal history as received from reporting agencies. I understand that this information will be used to determine my eligibility for a volunteer position with the Boy Scouts of America. I also understand that as long as I remain a volunteer, additional consumer reports may be procured at any time. I understand that if the Boy Scouts of America chooses not to accept my application or to revoke my membership based on information contained in a consumer report, I will receive a summary of my rights under the Fair Credit Reporting Act and contact information for the reporting agency, LexisNexis.

**ADDITIONAL NOTICES TO CALIFORNIA, MINNESOTA, OKLAHOMA, AND NEW YORK APPLICANTS California**

Under California law, the consumer reports described above that the Boy Scouts of America will procure on you are defined as investigative consumer reports. These reports will be procured in connection with your application to serve as a volunteer, and additional reports may be procured at any time during your service as volunteer in order to evaluate your continued suitability for volunteer service. The reports may include information on your character, general reputation, personal characteristics, and mode of living.

Under section 1786.22 of the California Civil Code, you may inspect the file maintained on you by LexisNexis, during normal business hours and with proper identification. You may also obtain a copy of this file, upon submitting proper identification and paying the costs of duplication, by appearing at LexisNexis offices in person, during normal business hours and on reasonable notice, or by certified mail upon making a written request. You may also receive a summary of the information contained in this file by telephone. LexisNexis will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information. This written explanation will be provided whenever a file is provided to you for visual inspection. If you appear in person, you may be accompanied by one other person of your choosing, who must furnish reasonable identification.

**For Applicants in California, Minnesota, and Oklahoma Only**

You have the right to request a free copy of any report procured on you. If you wish to receive a free copy of any report procured on you, check the box below.

- I request a free copy of any report procured on me.

**New York**

As explained above, a consumer report will be requested in connection with your application, and additional consumer reports may be requested during the course of your service with the Boy Scouts of America. You have the right, upon request, to be informed whether or not a consumer report was requested and, if a consumer report was requested, of the name and address of the consumer reporting agency that furnished the consumer report.

**My signature below indicates that I have read, understand, and accept the accompanying disclosures and acknowledgments.**

First name \_\_\_\_\_ (No initials or nicknames) Please print. Middle name \_\_\_\_\_ Last name \_\_\_\_\_ Suffix \_\_\_\_\_

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_ Unit No \_\_\_\_\_



## Part A: Informed Consent, Release Agreement, and Authorization

Full name: \_\_\_\_\_  
 Date of birth: \_\_\_\_\_

**High-adventure base participants:**  
 Expedition/crew No.: \_\_\_\_\_  
 or staff position: \_\_\_\_\_

### Informed Consent, Release Agreement, and Authorization

I understand that participation in Scouting activities involves the risk of personal injury, including death, due to the physical, mental, and emotional challenges in the activities offered. Information about those activities may be obtained from the venue, activity coordinators, or your local council. I also understand that participation in these activities is entirely voluntary and requires participants to follow instructions and abide by all applicable rules and the standards of conduct.

In case of an emergency involving me or my child, I understand that efforts will be made to contact the individual listed as the emergency contact person by the medical provider and/or adult leader. 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 protected health information to the adult in charge, camp medical staff, camp management, and/or any physician or health-care provider involved in providing medical care to the participant. 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, includes 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.

(If applicable) I have carefully considered the risk involved and hereby give my informed consent for my child to participate in all activities offered in the program. I further authorize the sharing of the information on this form with any BSA volunteers or professionals who need to know of medical conditions that may require special consideration in conducting Scouting activities.


**With appreciation of the dangers and risks associated with programs and activities, on my own behalf and/or on behalf of my child, I hereby fully and completely release and waive any and all claims for personal injury, death, or loss that may arise against the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with any program or activity.**

I also hereby assign and grant to the local council and the Boy Scouts of America, as well as their authorized representatives, 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 further 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 BSA, and I specifically waive any right to any compensation I may have for any of the foregoing.

*Every person who furnishes any BB device to any minor, without the express or implied permission of the parent or legal guardian of the minor, is guilty of a misdemeanor. (California Penal Code Section 19915[a]) My signature below on this form indicates my permission.*

I give permission for my child to use a BB device. (Note: Not all events will include BB devices.)

**Checking this box indicates you DO NOT want your child to use a BB device.**

 **NOTE: Due to the nature of programs and activities, the Boy Scouts of America and local councils cannot continually monitor compliance of program participants or any limitations imposed upon them by parents or medical providers. However, so that leaders can be as familiar as possible with any limitations, list any restrictions imposed on a child participant in connection with programs or activities below.**

List participant restrictions, if any:  None  
 \_\_\_\_\_

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. If I am participating at Philmont Scout Ranch, Philmont Training Center, Northern Tier, Sea Base, or the Summit Bechtel Reserve, **I have also read and understand the supplemental risk advisories, including height and weight requirements and restrictions, and understand that the participant will not be allowed to participate in applicable high-adventure programs if those requirements are not met.** The participant has permission to engage in all high-adventure activities described, except as specifically noted by me or the health-care provider. If the participant is under the age of 18, a parent or guardian's signature is required.

Participant's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Parent/guardian signature for youth: \_\_\_\_\_ Date: \_\_\_\_\_  
 (If participant is under the age of 18)

### Complete this section for youth participants only:

#### Adults Authorized to Take Youth to and From Events:

You must designate at least one adult. Please include a phone number.

Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_

Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_

#### Adults NOT Authorized to Take Youth to and From Events:

Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_

Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_



## Part B1: General Information/Health History

Full name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

**High-adventure base participants:**

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

Age: \_\_\_\_\_ Gender: \_\_\_\_\_ Height (inches): \_\_\_\_\_ Weight (lbs.): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_ Phone: \_\_\_\_\_

Unit leader: \_\_\_\_\_ Unit leader's mobile #: \_\_\_\_\_

Council Name/No.: \_\_\_\_\_ Unit No.: \_\_\_\_\_

Health/Accident Insurance Company: \_\_\_\_\_ Policy No.: \_\_\_\_\_



Please attach a photocopy of both sides of the insurance card. If you do not have medical insurance, enter "none" above.

**In case of emergency, notify the person below:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Home phone: \_\_\_\_\_ Other phone: \_\_\_\_\_

Alternate contact name: \_\_\_\_\_ Alternate's phone: \_\_\_\_\_

### Health History

Do you currently have or have you ever been treated for any of the following?

Yes	No	Condition	Explain
		Diabetes	Last HbA1c percentage and date: _____ Insulin pump: Yes <input type="checkbox"/> No <input type="checkbox"/>
		Hypertension (high blood pressure)	
		Adult or congenital heart disease/heart attack/chest pain (anginal)/heart murmur/coronary artery disease. Any heart surgery or procedure. Explain all "yes" answers.	
		Family history of heart disease or any sudden heart-related death of a family member before age 50.	
		Stroke/TIA	
		Asthma/reactive airway disease	Last attack date: _____
		Lung/respiratory disease	
		COPD	
		Ear/eyes/nose/sinus problems	
		Muscular/skeletal condition/muscle or bone issues	
		Head injury/concussion/TBI	
		Altitude sickness	
		Psychiatric/psychological or emotional difficulties	
		Neurological/behavioral disorders	
		Blood disorders/sickle cell disease	
		Fainting spells and dizziness	
		Kidney disease	
		Seizures or epilepsy	Last seizure date: _____
		Abdominal/stomach/digestive problems	
		Thyroid disease	
		Skin issues	
		Obstructive sleep apnea/sleep disorders	CPAP: Yes <input type="checkbox"/> No <input type="checkbox"/>
		List all surgeries and hospitalizations	Last surgery date: _____
		List any other medical conditions not covered above	



## Part B2: General Information/Health History

Full name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

**High-adventure base participants:**

Expedition/crew No.: \_\_\_\_\_  
or staff position: \_\_\_\_\_

### Allergies/Medications

**DO YOU USE AN EPINEPHRINE AUTOINJECTOR?** Exp. date (if yes) \_\_\_\_\_  YES  NO

**DO YOU USE AN ASTHMA RESCUE INHALER?** Exp. date (if yes) \_\_\_\_\_  YES  NO

Are you allergic to or do you have any adverse reaction to any of the following?

Yes	No	Allergies or Reactions	Explain
		Medication	
		Food	

Yes	No	Allergies or Reactions	Explain
		Plants	
		Insect bites/stings	

List all medications currently used, including any over-the-counter medications.

Check here if no medications are routinely taken.  If additional space is needed, please list on a separate sheet and attach.

Medication	Dose	Frequency	Reason

YES  NO Non-prescription medication administration is authorized with these exceptions: \_\_\_\_\_

Administration of the above medications is approved for youth by:

\_\_\_\_\_/\_\_\_\_\_  
Parent/guardian signature MD/DO, NP, or PA signature (if your state requires signature)

**Bring enough medications in sufficient quantities and in the original containers. Make sure that they are NOT expired, including inhalers and EpiPens. You SHOULD NOT STOP taking any maintenance medication unless instructed to do so by your doctor.**

### Immunization

The following immunizations are recommended. Tetanus immunization is required and must have been received within the last 10 years. If you had the disease, check the disease column and list the date. If immunized, check yes and provide the year received.

Yes	No	Had Disease	Immunization	Date(s)
			Tetanus	
			Pertussis	
			Diphtheria	
			Measles/mumps/rubella	
			Polio	
			Chicken Pox	
			Hepatitis A	
			Hepatitis B	
			Meningitis	
			Influenza	
			Other (i.e., HIB)	
			Exemption to immunizations (form required)	

**Please list any additional information about your medical history:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**DO NOT WRITE IN THIS BOX.**  
Review for camp or special activity.

Reviewed by: \_\_\_\_\_

Date: \_\_\_\_\_

Further approval required:  Yes  No

Reason: \_\_\_\_\_

Approved by: \_\_\_\_\_

Date: \_\_\_\_\_



# Routine Drug Administration Record

Name: \_\_\_\_\_ Campsite: \_\_\_\_\_

Troop No.: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Classification: \_\_\_\_\_

Drug hypersensitivity: \_\_\_\_\_ Weight: \_\_\_\_\_

Prescribing Physician: \_\_\_\_\_

Medications: \_\_\_\_\_ Rx: No Yes Number(s): \_\_\_\_\_  
 Dosage: \_\_\_\_\_ Date filled: \_\_\_\_\_

Route: P.O. I.M. S.C. S.L. Topical Inhalation Rectal  
 Times: PRN Daily B.I.D. T.I.D. Q.I.D. A.C. P.C. H.S.

Amount in bottle: \_\_\_\_\_ Comments: \_\_\_\_\_

Med Time	S	M	T	W	T	F	S

Prescribing Physician: \_\_\_\_\_

Medications: \_\_\_\_\_ Rx: No Yes Number(s): \_\_\_\_\_  
 Dosage: \_\_\_\_\_ Date filled: \_\_\_\_\_

Route: P.O. I.M. S.C. S.L. Topical Inhalation Rectal  
 Times: PRN Daily B.I.D. T.I.D. Q.I.D. A.C. P.C. H.S.

Amount in bottle: \_\_\_\_\_ Comments: \_\_\_\_\_

Med Time	S	M	T	W	T	F	S

Prescribing Physician: \_\_\_\_\_

Medications: \_\_\_\_\_ Rx: No Yes Number(s): \_\_\_\_\_  
 Dosage: \_\_\_\_\_ Date filled: \_\_\_\_\_

Route: P.O. I.M. S.C. S.L. Topical Inhalation Rectal  
 Times: PRN Daily B.I.D. T.I.D. Q.I.D. A.C. P.C. H.S.

Amount in bottle: \_\_\_\_\_ Comments: \_\_\_\_\_

Med Time	S	M	T	W	T	F	S

Prescribing Physician: \_\_\_\_\_

Medications: \_\_\_\_\_ Rx: No Yes Number(s): \_\_\_\_\_  
 Dosage: \_\_\_\_\_ Date filled: \_\_\_\_\_

Route: P.O. I.M. S.C. S.L. Topical Inhalation Rectal  
 Times: PRN Daily B.I.D. T.I.D. Q.I.D. A.C. P.C. H.S.

Amount in bottle: \_\_\_\_\_ Comments: \_\_\_\_\_

Med Time	S	M	T	W	T	F	S

Prescribing Physician: \_\_\_\_\_

Medications: \_\_\_\_\_ Rx: No Yes Number(s): \_\_\_\_\_  
 Dosage: \_\_\_\_\_ Date filled: \_\_\_\_\_

Route: P.O. I.M. S.C. S.L. Topical Inhalation Rectal  
 Times: PRN Daily B.I.D. T.I.D. Q.I.D. A.C. P.C. H.S.

Amount in bottle: \_\_\_\_\_ Comments: \_\_\_\_\_

Med Time	S	M	T	W	T	F	S

P.O. = by mouth  
 PRN = as needed  
 A.C. = before meals

I.M. = intramuscular  
 B.I.D. = two times a day  
 P.C. = after meals

S.C. = sub-cutaneous  
 T.I.D. = three times a day  
 H.S. = hours of sleep (taken at bedtime)

S.L. = sub-lingual-under-tongue  
 Q.I.D. = four times a day

Initial    Signature    Name    Position

**INSTRUCTIONS:** Sheet is for reproduction as needed. It should be three-hole punched and kept in a binder during camp week. Use one sheet for each camper with a prescription. Record all medicines brought to camp (up to FIVE medications per sheet). The medication, dosage and dosage schedule should be copied from the prescription. Record dispensing times and days in the blocks provided for each medication as they are dispensed. After camp, place sheet(s) inside the first aid log.

# Pre-Event Medical Screening Checklist

This is a tool to assist leaders in identifying potentially communicable diseases in advance of event participation. The intent of this checklist is to review with each participant their current health status both before departure and upon arrival at the event.

---

Has the participant had any of the following symptoms in the last 24 hours?

- Fever (100.4 F or greater)
- Vomiting
- Diarrhea

If the participant has fever, vomiting, OR diarrhea—**he or she should stay home.**

Has the participant had any of the following symptoms in the last 24 hours?

- Unexplained extreme fatigue or muscle aches
- Rash
- Cough
- Sore throat
- Open sore

If the participant has any two (or more) of these symptoms—**he or she should stay home.** If the participant has one of these symptoms, discuss any limitations and restrictions and consider having him or her stay home.

Participants who become ill should not return to the activity until they are cleared by a health-care provider.



**Parents Commitment to Transport**  
**To Be Submitted Upon Arrival To Camp**

I understand that at any time during my child's stay at Camp Perry Scout Reservation I may be called on to transport my camper from camp for medical reasons. I commit to be available by phone for the entire session my scout is at camp should I need to be contacted by camp or troop leadership. Furthermore, I agree to pick up my scout within 10 hours of being contacted by the camp or troop leaders. I will also provide a second contact should unforeseen circumstances make me unavailable.

\_\_\_\_\_  
Scout Name

\_\_\_\_\_  
Unit Number

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Primary contact name

\_\_\_\_\_  
Phone #

\_\_\_\_\_  
Secondary contact

\_\_\_\_\_  
Phone #



## APPENDIX 5 - ACTIVITY CONSENT FORM

# ACTIVITY CONSENT FORM AND APPROVAL BY PARENTS OR LEGAL GUARDIAN FORMULARIO DE CONSENTIMIENTO Y APROBACIÓN DE ACTIVIDAD POR PARTE DE LOS PADRES DE FAMILIA O TUTORES

The recommended use of this form is for the consent and approval for Cub Scouts, Boy Scouts, Varsity Scouts, Venturers, and guests to participate in a trip, expedition, or activity. It is required for use with flying plans.

El uso recomendado de este formulario es para obtener el consentimiento y aprobación para Cub Scouts, Boy Scouts, Varsity Scouts, Venturers, e invitados para participar en un viaje, expedición o actividad. Es obligatorio para su uso con planes de vuelo.

First name of participant Nombre del participante	Middle initial Inicial del segundo nombre	Last name Apellido
Birth date (month/day/year) Fecha de nacimiento (mes/día/año) _____ / _____ / _____		Age during activity Edad al momento de realizar la actividad _____

Address Domicilio		
City Ciudad	State Estado	Zip Código postal

Has approval to participate in (name of activity, orientation flight, outing trip, etc.) \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_  
 Tiene la aprobación para participar en (nombre de la actividad, vuelo de orientación, excursión, etc.) \_\_\_\_\_ De \_\_\_\_\_ (Date) a \_\_\_\_\_ (Date)  
 (fecha) (fecha)

### INFORMED CONSENT, RELEASE AGREEMENT, AND AUTHORIZATION

I understand that participation in Scouting activities involves the risk of personal injury, including death, due to the physical, mental, and emotional challenges in the activities offered. Information about those activities may be obtained from the venue, activity coordinators, or local council. I also understand that participation in these activities is entirely voluntary and requires participants to follow instructions and abide by all applicable rules and the standards of conduct.

In case of an emergency involving my child, I understand that efforts will be made to contact me. In the event I cannot be reached, permission is hereby given to the medical provider to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child. Medical providers are authorized to disclose protected health information to the adult in charge and/or any physician or health care provider involved in providing medical care to the participant. 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, includes 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.

**With appreciation of the dangers and risks associated with programs and activities including preparations for and transportation to and from the activity, on my own behalf and/or on behalf of my child, I hereby fully and completely release and waive any and all claims for personal injury, death, or loss that may arise against the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with any program or activity.**

**NOTE: The Boy Scouts of America and local councils cannot continually monitor compliance of program participants or any limitations imposed upon them by parents or medical providers. List any restrictions imposed on a child participant in connection with programs or activities below and counsel your child to comply with those restrictions.**

List participant restrictions, if any: \_\_\_\_\_  
 None

### CONSENTIMIENTO INFORMADO, CONVENIO DE EXONERACIÓN Y AUTORIZACIÓN

Entiendo que la participación en actividades Scouting implica el riesgo de lesiones personales, incluyendo la muerte, debido a los retos físicos, mentales y emocionales en las actividades que se ofrecen. Se puede obtener información sobre dichas actividades en la sede, con los coordinadores de la actividad o el concilio local. También entiendo que la participación en estas actividades es totalmente voluntaria y requiere que los participantes sigan instrucciones y acaten todas las reglas y normas de conducta pertinentes.

En caso de que mi hijo se vea involucrado en una emergencia, entiendo que se realizarán esfuerzos para contactarme. En caso de que yo no pueda ser localizado, por este medio otorgo permiso al proveedor de servicios médicos para garantizar el tratamiento adecuado, incluyendo hospitalización, anestesia, cirugía o inyecciones de medicamentos para mi hijo. Los proveedores de servicios médicos están autorizados a revelar información médica protegida al adulto a cargo, médico o proveedor de servicios médicos involucrado en la prestación de atención médica para el participante. La Información de salud protegida/Información médica confidencial (PHI/CHI, por sus siglas en inglés) bajo los Estándares de privacidad de información médica individualmente identificable, 45 C.F.R. §§ 160.103, 164.501, etc., y siguientes, como se enmiendan de vez en cuando, incluyen resultados de reconocimientos médicos, resultados de pruebas y el tratamiento proporcionado para fines de evaluación médica del participante, seguimiento y comunicación con los padres o tutor legal del participante, o determinación de la capacidad del participante para continuar en las actividades del programa.

**Con reconocimiento de los peligros y riesgos asociados con los programas y actividades incluyendo preparativos y transportación hacia y desde la actividad, en mi propio nombre o en nombre de mi hijo, por este conducto eximo total y completamente, y renuncio a cualquiera y toda reclamación por lesiones personales, muerte o pérdidas que puedan surgir, a la organización Boy Scouts of America, el concilio local, los coordinadores de la actividad y todos los empleados, voluntarios, grupos involucrados, u otras organizaciones asociadas con cualquier programa o actividad.**

**NOTA: La organización Boy Scouts of America y los concilios locales no pueden vigilar continuamente el cumplimiento de los participantes del programa o cualquier limitación impuesta sobre ellos por los padres o proveedores de servicios médicos. Enumerar más abajo las restricciones impuestas a un niño participante en relación con los programas o actividades.**

Restricciones del participante, si existen: \_\_\_\_\_  
 Ninguna

Participant's signature Firma del participante	Date Fecha
---	---------------

Parent/guardian printed name Nombre con letra de molde del padre de familia/tutor	Parent/guardian signature Firma del padre de familia/tutor	Date Fecha
--	---	---------------

Area code and telephone number (best contact and emergency contact)  
 Código de área y número telefónico (primer contacto y contacto de emergencia)

Email (for use in sharing more details about the trip or activity)  
 Correo electrónico (para informar más detalles sobre el viaje o actividad)

Contact the adult leader with any questions:  
 Póngase en contacto con el líder adulto si es que tiene preguntas:

Name Nombre	Phone Teléfono	Email Correo electrónico
----------------	-------------------	-----------------------------





# UNIT FIREGUARD CHART

Fill out and post this chart on your campsite bulletin board.

Troop

Troop fire warden

Camp

Troop campsite

Dates



We will prevent fires by breaking matches in two after using.



Putting fires COLD OUT with water.



Feeling with fingers to test heat.

## FLAMMABILITY WARNING CAMPING SAFETY RULES

NO TENT MATERIAL IS FIREPROOF, AND IT CAN BURN WHEN EXPOSED TO HEAT OR FIRE. FOLLOW THESE RULES:

- Only flashlights and battery-powered lanterns are permitted in tents. **NO FLAMES IN TENTS** is a rule which must be enforced.
- Chemical-fueled stoves, heaters, lanterns, lighted candles, matches, or other flame sources should **never** be used in or near tents.
- Do not pitch tents near open fire.
- Do not use flammable chemicals near tents: charcoal lighter, spray cans of paint, or bug killer and repellent.
- Be careful when using electricity and lighting in tents.
- Always extinguish cooking and campfires properly.
- Obey all fire laws, ordinances, and regulations.
- Keep campers informed on a daily basis of your camp's fire danger.

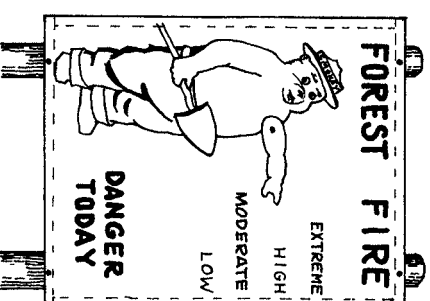
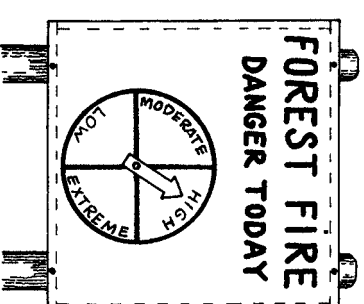
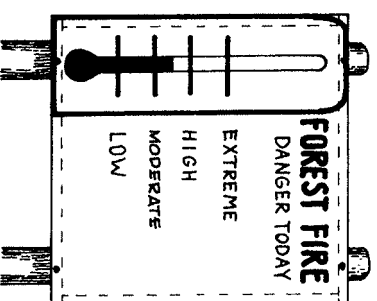
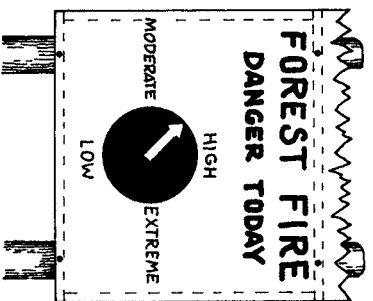


Clearing all burnable material 4 to 6 feet away from the fires or as required by local law.

In the case of Cub Scouts, they should immediately seek adult help, sound the alarm by yelling, "Fire!" and stay away from attempting to fight any camp fire. If adult help is not readily available, the Cub Scout should continue to sound the alarm, send a runner for help, and/or dial the camp office or 911.

## Unit Campsite Fire Prevention Assignments

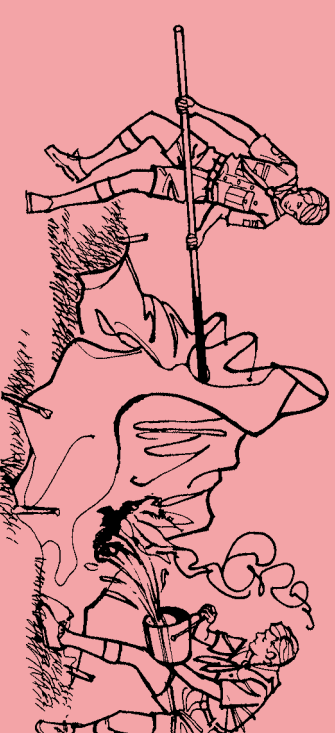
First Day _____ Date _____ Patrol _____ Fire Warden _____	Equipment Checked
Second Day _____ Date _____ Patrol _____ Fire Warden _____	Equipment Checked
Third Day _____ Date _____ Patrol _____ Fire Warden _____	Equipment Checked
Fourth Day _____ Date _____ Patrol _____ Fire Warden _____	Equipment Checked
Fifth Day _____ Date _____ Patrol _____ Fire Warden _____	Equipment Checked
Sixth Day _____ Date _____ Patrol _____ Fire Warden _____	Equipment Checked
Seventh Day _____ Date _____ Patrol _____ Fire Warden _____	Equipment Checked



## SOUND ALARM



## DROP TENTS (CANVAS ONLY) IF NECESSARY AND SAFE TO DO SO



## IN CASE OF FIRE REPORTING AND ASSEMBLY INSTRUCTIONS

At some camps local changes are made in these suggested procedures. All exceptions, however, should be made on the recommendation and with the approval of local fire authorities.

### IN A UNIT CAMPSITE

1. Sound the alarm by yelling "Fire!" and then notify the first adult you see, then report to a camp officer or the camp fire warden.
2. Extinguish a fire only if it can be done quickly and easily.
3. When the central alarm is sounded to warn the camp, quickly mobilize in your unit. Move to your preassigned point immediately and await directions.
4. A runner reports to the camp office for instructions from the camp fire warden.
5. In the event of a tent fire, you can douse it with water or sand, or simply stand back and let professionals fight the fire.

### OUTSIDE UNIT CAMPSITE

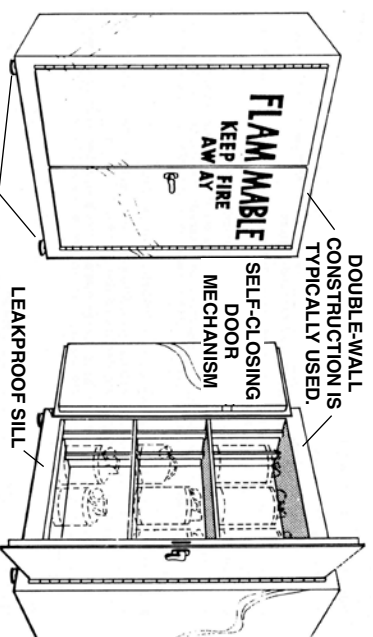
1. If you discover a fire anywhere in camp, report immediately to the camp office so the alarm may be sounded and fire authorities notified.
2. Camp fire warden sounds the central alarm, and your unit follows steps 3 and 4 above.
3. **Remember:** Campers should not be directly involved in the fire fighting process except for fires that can be quickly and easily extinguished.

In case of a fire in our campsite, we will notify \_\_\_\_\_ Camp fire warden and follow the instructions of our unit fire warden.

## Control of Flammable/Combustible Liquids and Gases in Camp

Because serious accidents can happen in connection with the use of liquid fuel, propane, butane, etc., in lanterns and stoves and as a result of igniting fires with liquid starters, adult supervision is required when chemical fuels are being used for lighting and cooking. Local councils have the option of restricting the use of chemical-fueled stoves, lanterns, and heaters in campsites under their jurisdiction.

- **Knowledgeable adult supervision** must be provided when Scouts are involved in the storing, handling, and filling of stoves or lanterns or the lighting of chemical fuels.
- **Battery-operated lanterns and flashlights** should be used by Scouts in camping activities, particularly in and around all tentage. No chemical-fueled lantern, stove, or heater is to be used inside a tent.
- **Kerosene, gasoline, or liquefied petroleum-fuel lanterns** may, when permitted, be used inside permanent buildings or for outdoor lighting. When used indoors, there must be adequate ventilation. Strict adherence to the safety standards and the instructions of the manufacturers in fueling and lighting such stoves and lanterns must be carried out under the direct supervision of a responsible and knowledgeable adult.
- **Empty liquid-petroleum cylinders for portable stoves and lanterns** should be returned home or to base camp. They can explode when heated; therefore, they must never be put in fireplaces or with burnable trash.
- **The use of liquid fuels for starting any type of fire is prohibited.** This includes damp wood, charcoal, and cer-



### Year-Round Prevention Plan

Will your camp be there next season? This is a good question to ask at the close of each camping season as you pack away equipment and leave. In fairness to next year's campers, do everything that can be done to ensure the safety of camp equipment and camp timber.

Fall, with its dry, dead leaves that often bank high around camp buildings is, in many sections of the country, the most dangerous fire season of the entire year. Spring is another bad time.

Here is a checklist of things to do at all times to be sure that your camp is fireproof year-round:

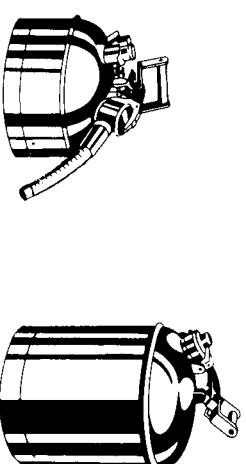
1. Destroy greasy rags.
2. Dispose of all combustible refuse and trash safely.
3. Be sure that doors and shutters are strong enough to keep out trespassers, vandals, or thieves.

emorial campfires. Solid-type starters are just as effective, are easier to store and carry, and are much safer to use for this purpose.

- **Space heaters that use chemical fuels consume oxygen and must be used only in well-ventilated areas.** Using space heaters in poorly ventilated cabins, camper trucks, and recreation vehicles can cause fires and asphyxiation. The use of charcoal burners indoors can be lethal in causing carbon monoxide poisoning.

#### Bulk Storage and Practices

Storage of liquid fuel and other flammables is a camp maintenance function. Filling tanks for motors, vehicles, and motorboats should always be handled by someone qualified by age and training for this responsibility. Similar responsible handling and control are prescribed for the limited use of kerosene. Use kerosene only for outside night lights and stationary heating stoves (not portable). Both gasoline and kerosene should be kept in well-marked safety cans and stored in ventilated locked boxes located away from buildings and tents. Large quantities of gasoline should be stored in a properly installed fuel tank with pump. Keys to pumps and storage boxes or sheds should be given to one adult (primarily the camp ranger), who distributes these fuels. Propane or butane storage tanks and permanent caps should be installed by experienced and knowledgeable individuals and changed only by gas distributors. These installations must conform to local regulations and must be inspected regularly.



USE SAFETY CANS ONLY!

4. Stow away firewood and loose equipment that might be used by trespassers.
5. Clear away dead grass or trees, ferns, leaves, bushes, straw piles, and trash from buildings.
6. Clean grease traps and dispose of the grease by burning it at a safe place or burying it in mineral earth.
7. Be sure the camp is ready for winter use. Check fuels, wall and floor protection around heaters, and protecting screens for fireplaces. Inspect location of fire pails, fire extinguishers, and mobile fire-fighting equipment.
8. Develop a fire prevention plan in accordance with OSHA standard 29 CFR 1910.139.

## HOW YOUR UNIT FIREGUARD PLAN WORKS

### DUTIES

When you arrived at camp, you were oriented and trained in the use of the unit fireguard plan. It is your responsibility as a unit leader to train your Scouts in fire prevention, fire detection, reporting, and fire control. Only implement fire control techniques that can be done quickly and easily.

Study the procedures outlined on this chart and then train your staff and youth members. Post the chart for all to see and follow. At some camps local changes are made in these suggested procedures. All exceptions, however, should be made on the written recommendation and with the approval of local fire authorities.

Organize to make the fireguard plan work by appointing capable fire wardens and deputies.

#### FIRE WARDENS AND DEPUTIES

As responsible Scouts appointed by their adult leader, the unit fire warden and his deputy are in charge of training, know where fire equipment is located, and are familiar with the unit fireguard chart. They instruct all unit fire wardens and Scouts in the operation of the camp fireguard plan. They conduct annual inspections of fire extinguishers and check to be sure all cooking fires, heating fires, and campfires are out at night or when no one is attending or monitoring the fire during the day. Unit fire wardens and deputies conduct fire drills at least once a week and follow the direction of the camp fire warden. They receive reports related to fire hazards daily from the duty fire warden.

Every boy in the unit should feel responsible for fire prevention, but the unit fire patrol for each day must be alert and ready to evacuate and account for everyone in case of fire emergency or drill.

**If a small fire breaks out, the person discovering it should take immediate action, whether or not he is on the fire patrol for the day. Time is the most important element in the suppression of a fire. Some examples of fire control techniques are:**

- **Immediately send someone to seek assistance, send a runner for help, and/or dial the camp office or 911.**
- **Douse fire with water or sand.**
- **Smother fire with a lid.**
- **In the event of a tent fire (canvas only), simply kick out the end tent poles if it can be done safely.**

**Remember: Campers should not be involved in the fire fighting process except for fires that can be quickly and easily extinguished.**

In making daily inspections of the unit campsite, the unit fire warden should follow the fire-prevention suggestions and use the fire-fighting equipment illustrations found throughout this chart as a guide. Campsite equipment will vary according to your camp. Results of the daily inspection should be posted on the chart in the space provided.

#### PATROL FIRE WARDEN

The patrol leader is responsible for training his patrol in the unit fireguard plan and leading the unit in practice evacuation and fire prevention.

He checks daily to be sure all members are preventing fires and are prepared in case a fire breaks out. He makes sure and double-checks that fires are built only on nonburnable soil in areas where they will not spread. He verifies to see that all fires are put **COLD OUT** and that open flames are not permitted in or near tents. He shows patrol members how to drop tents (canvas only) in case of fire. **In the event of a tent fire (canvas only), you can simply kick out the end tent poles if it can be done safely and let professionals fight the fire.**

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BOY SCOUTS OF AMERICA®

### ADULT APPRAISAL SHEET

Item	Excellent	Good	Satisfactory	Unsatisfactory
Staff Services				
Food Services				
Program Helps				
Health and Sanitation				

Remarks on any of the above items:

1.

2.

3.

4.

5.

What did you enjoy most about camp?

1.

2.

3.

4.

5.

What suggestions do you have to help improve before camp?

1.

2.

3.

4.

5.

# Youth Appraisal Sheet

Item	Excellent	Good	Satisfactory	Unsatisfactory
Staff Services				
Food Services				
Program Helps				
Health and Sanitation				

Remarks on any of the above items:

1.

2.

3.

4.

5.

What did you enjoy most about camp?

1.

2.

3.

4.

5.

What suggestions do you have to help improve before camp?

1.

2.

3.

4.

5.

