

Troop 32 Outing Check List

Destination:	Happy Hollow Camp Elkhorn, WI	[<input type="checkbox"/>] Day Hike	[<input checked="" type="checkbox"/>] Overnight Camp
Leader-In-Charge	Mr. Joe Ficner	Phone:	708-743-7374
Departure Date:	January 14th, 2011	Meet At:	St. Leonard School Start Time: 5:30pm
Return Date:	January 16th, 2011	Estimated Arrival Time: 2:30pm	
Uniform:	Full Scout Uniform		

Personal Equipment

<table border="0" style="width: 100%;"> <tr><td><input type="checkbox"/></td><td>Good Supper before departure</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Heavy Jacket</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Extra T-Shirt</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>4 Pair of Socks</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Pajamas or Hooded Sleepwear</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Change of Underwear</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Handkerchiefs</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Blue Jeans</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Extra Pair of Shoes or Sneakers</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Gloves</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Waterproof Poncho or Raincoat</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Snow Boots or Rubber Boots</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Hat or Cap</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Scout Handbook</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Pocket Notebook & Pencil or Pen</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Pocket Knife (<i>No Sheath Knives</i>)</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Matches (Wooden Kitchen Type in Metal Case)</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Flashlight with Extra Batteries</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Rope (1/4"X25')</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Compass</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Towel-Wash Cloth- Soap in Container</td></tr> </table>	<input type="checkbox"/>	Good Supper before departure	<input checked="" type="checkbox"/>	Heavy Jacket	<input checked="" type="checkbox"/>	Extra T-Shirt	<input checked="" 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Cost of Outing \$ \$20.00 To cover the cost of Food and Registration Fee

TEAR OFF AND RETURN TO LEADERS BY:

I HEREBY GRAND OUR PERMISSION FOR SCOUT _____ TO ATTEND
 ON _____ AND UNDERSTAND HE WILL ABIDE BY THE RULES SET BY THE LEADERS IN CHARGE
 OUR SON IS COVERED BY HOSPITALIZATION AND MEDICAL INSURANCE; **INSURANCE COMPANY**
 _____, **POLICY NUMBER** _____. WE GRANT PERMISSION TO LEADERS
 IN CHARGE TO TAKE ALL NECESSARY ACTION TO PROVIDE OR SECURE APPROPRIATE MEDICAL
 ATTENTION IN THE UNLIKELY EVENT OF AN EMERGENCY.
 OUR SON WILL BE TAKING THE FOLLOWING **MEDICATION** _____
FOR _____ **(REASON)** _____
 OUR SON THE FOLLOWING **ALLERGIES** _____ **NEEDS** _____
 OUR SON THE FOLLOWING **FOOD ALLERIES** _____ **NEEDS** _____

ENCLOSED IS \$ _____ TO COVER THE COST OF FOOD AND RESERVATION

TRANSPORTATION

[<input type="checkbox"/>] I CANNOT DRIVE OR STAY	[<input type="checkbox"/>] I WILL DRIVE BUT CANNOT STAY
[<input type="checkbox"/>] I WILL DRIVE AND STAY FOR THE OUTING	[<input type="checkbox"/>] I WILL STAY BUT CANNOT DRIVE
IN CASE OF EMERGENCY CALL: _____	APPROVAL _____