

Camping in the Squirrel's Nest

Shoot the Hooch by Tubes through Helen

Water Slide

Patrol Cook Off's

Best Breakfast Best Dutch Oven Dinner Best Dessert

Dates:	June 4 – 6
Place:	Unicoi State Park near Helen, GA
Cost:	\$12 per Participant to cover Camping, Tubing & Water Slide
Prerequisite:	All Participants must pass BSA Swimmers Test
	Competitions at be approved by Patrol Advisors be submitted to be included on the new Troop Web Site
Coordinators fo	or Weekend: Tom Morin & Marty Leinweber

Tom Morin & Marty Leinweber

Troop 1776 Activity Information & Permission Form – June 2004 Outing

	Forn	n submitte	al and payment due no later than on or before Tuesday, June 1, 2004
Planned Activities:		vities:	Tubing Down the Hooch, Water Slide, Patrol Cook Off's
Camping Location:		cation:	Squirrel's Nest Platforms at Unicoi State Park
Date & Time:			June 4 – 5:30 PM LaSalette Hall
			Quartermasters report at 5:00 PM
Return:			June 6 – 12:30 PM LaSalette Hall
Trip Costs:			\$12 per participant which covers camping, tubing and water slide
			Patrol Food costs are additional
Required			Personal gear including patrol and troop gear – tents not required but
Equipment:			bring tarps for the platforms
Adult Contact:		ct:	Tom Morin H:(770) 973-6102 C:(770) 633-9409 tommorin@aol.com
Emergency Contact:		Contact:	Marty Leinweber H: (770) 973-3234 C: (404) 944-1159 mclatl@att.net
`			op portion as a reminder and return the bottom to Tom Morin by due date
Squirre	l's Nest &	Tubing	
Soout	t Nomo		
Scoul	t Name	•	
Yes	No	Does v	our Scout have permission to attend the Troop 1776 Event?
105	110	Dues y	our beout have permission to attend the 1100p 1770 Event.
			If "Yes", complete the following questions. If "No", describe the reasons on the back.
Yes	No	Is your	Scout taking any medications at this time?
X 7	NT-	D	Coord house a medical condition the location about 1 law on about 9
Yes	No	Does y	our Scout have a medical condition the leaders should know about?
Yes	No	Should	your Scout be restricted from any planned activity?
105	110	Silvaia	your seour se restricted from any planned detrity.
Yes	No	Are you available to assist with this Troop activity?	
Yes	No	Can yo	ou drive Scouts to or from this Troop activity? How many Total Seatbelts?
Yes	No	•	· liability insurance information on file with the Troop Secretary?
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I have reviewed the activities planned for this Troop outing and fully accept the risks associated with my son's participation.

Signature of Parent or GuardianDate