
TROOP 166 TRIP BULLETIN Camp Parsons Service Project**December 2-3, 2017****PLACE:** Camp Parsons, Bee Mill Rd., Brinnon WA.**DEPART:** Meet at Wedgwood Presbyterian Church parking lot **at 8:00am Saturday December 2nd**. The troop will depart at 8:30am. Rosters, maps, ferry tickets and driving instructions will be provided to the drivers in the parking lot by the trip sponsor.**LEADERS**

ADULT: Jim Thompson	Trip Sponsor and Asst. Scoutmaster	206-300-1204
Bill Montgomery	Scoutmaster	206-523-0072
Kirk Siqveland	Asst. Scoutmaster	206-856-9362
SCOUT: Earl Godfrey	SPL (Senior Patrol Leader)	206-257-4474

PROGRAM: This is an annual event for our troop. We go to Camp Parsons, do a service project, do advancement work and play board games and cards in a nice heated cabin. It rains, it snows, it does whatever it does. We learn things and have fun.

Expect cold, wet weather, and bring changes of clothing.

ROUTE: Edmonds ferry to Route 104 West. Turn right to stay on 104 towards Port Gamble. Go across the Hood Canal Bridge and stay on 104. Turn south onto 101. Turn left onto Bee Mill Road. The camp is on the right.**EQUIPMENT:** This trip is a car camping trip, and the Scouts will be sleeping in shelters, so no tents are needed. Bring warm sleeping bags and pads.

Scouts must be prepared for potential wet and cold weather. Patrols are required to coordinate cooking gear, stoves and fuel.

FOOD: Bring a bag lunch for Saturday. The patrols are responsible for preparing 2 meals: dinner Saturday and breakfast Sunday. Each patrol will invite an adult to join them. Bring \$8-12 to pay for patrol food, payable to your patrol's grubmaster.

We will likely stop at McDonald's for lunch on Sunday; bring money.

FEE: **\$25.00 CASH (CASH)** covers transportation. Bring some extra spending money for lunch on Sunday in case your driver stops on the way back. Scholarships are available. Contact Bill Montgomery at least 5 days prior to the outing.**RETURN:** Troop will arrive back at the church between 2 and 3 pm Sunday. Troop will call the phone tree contact on the way back.**SIGN-UP:** **Signed permission slips** and **\$25.00 CASH (YES, CASH, not checks)** need to be turned in to Jim Thompson at the Troop meetings on November 20th and 27th.

PERMISSION AND MEDICAL RELEASE FORM:

Scout _____ has my permission to participate in the Camp Parsons trip sponsored by Boy Scout Troop 166.

EMERGENCY PHONE NUMBER for any unexpected circumstance: _____
This phone contact **must** be available from departure at parking lot to return.

YES NO I will provide transportation for this trip **BOTH WAYS**. My vehicle has seatbelts for _____ passengers.

YES NO I will provide transportation for this trip **ONE WAY**. My vehicle has seat belts for _____ passengers.

If YES, Youth Protection Training completion Date: _____ . **Mandatory to drive or accompany Scouts. Valid for two years after completion.**

Auto Insurance Company: _____
Policy Number _____

Insurance Coverage: Liability Each Person \$ _____ Each Accident \$ _____
Property Damage \$ _____

Or initial if you meet or exceed Washington State Minimum Requirements _____
\$25,000 of bodily injury each person, \$50,000 of bodily injury each accident, \$10,000 property damage. –Amounts from WA. DOL 2006

Driver's License Number: _____

Vehicle make Vehicle Model year Owner's Name license plate No. Seat Belts

YES NO I'm available to accompany the Scouts on the outing and stay overnight.

I hereby give permission for any and all medical attention necessary to be administered to my child in the event of an accident, injury, sickness, etc., under the direction of the adults listed on this form or the adult leaders listed on the trip bulletin until such time as I may be contacted. This release is effective for the time during which my child is participating in a Troop 166 Boy Scout outing, including traveling to or from activities. I also hereby assume full responsibility for payment of any such treatment.

Parents/Guardians Names: _____

Home Address: _____

Home Phone: _____

Work Phone: _____

Health Insurance: _____

Policy Number: _____

Signature of Parent or Legal Guardian: _____

Date: _____

Scoutmaster: Bill Montgomery
Assistant Scoutmasters : Jim Thompson, Kirk Siqvelund