

Activity: Five-Mile Hike
Location: Ice Age Trail
Dates: Saturday, April 13, 2002
Meet at: 7:00 a.m. Saturday, CVBC
Estimated return: 4:00 p.m. Saturday, CVBC



COST: \$2.00 (for food; boys will cook by patrol)

Emergency contact: Tom Arneberg's cell phone -- 456-1871

Details: This will be our troop's second annual five-mile hike on the Ice Age Trail. Last year, everyone had a blast! This time, we will have the added benefit of a great kick-off breakfast. April 13 is the date of the monthly CVBC Men's Breakfast, so all the Scouts will get to hear Jim Woldhuis talk on a topic suitable for both boys and men. Big Jim and several of the other men will join us on the hike, and any dad is welcome to come along, too! The hike is a great introduction to Boy Scouting, since it's more fun than a Monday night meeting, but doesn't require the commitment and packing of a weekend camping trip.

Every hiker should try to wear hiking boots with good ankle support, and two pairs of socks to diminish the chance of blisters (preferably an inner layer of polypropylene, and wool socks on the outside). Everyone should also bring a raincoat or poncho in case it gets wet, and a hat and sunscreen in case it gets sunny. And, of course, **plenty of water!** You can probably fit all this in a small school backpack, but if you have a large backpack, this would be a good chance to check it out on the trail.

The boys will be building a campfire for lunch, and we will also bring a few backpacking stoves. The troop will provide hot beef stew for any dads who come, if you let us know ahead of time (bring your own bowl and spoon).

Retain the above information and return the form below with any money by the morning of the hike.

----- (cut here; return bottom portion) -----

Activity: Five-Mile Hike on the Ice Age Trail

Dates: April 13, 2002

Fees: \$_____ from boy's account + \$_____ enclosed check = \$2.00

In consideration of the benefits to be derived, and in view of the fact that the Boy Scouts of America is an educational institution, membership in which is voluntary, and having full confidence that every precaution will be taken to ensure the safety and well-being of my Scout son/ward, namely:

First _____ Middle _____ Last _____

on the activity above, I agree to his participation and waive all claims against the leaders of this trip, officers, agents and representatives of the Boy Scouts of America, and the sponsoring organization, Chippewa Valley Bible Church. In the event of an emergency, the troop leader of the activity named above has my permission to obtain medical treatment for this Scout at the nearest hospital or doctor, at my expense, if our own doctor is not readily available, and as restricted on the Emergency Data Sheet on file with the Troop.

() Yes, I will attend this activity with my son(s)

() Yes, I can drive (to / from) this activity; I can fit _____ scouts in my car

Signature of parent or guardian: _____ Date: _____

EMERGENCY INFORMATION: (In addition to Personal Health and Medical Records.)

During the activity listed above, I (parent/guardian) can be contacted at the following phone number(s):

(_____) (_____)

This scout is highly sensitive to:

What, if any, medication is this Scout taking?

Any special instructions for this medication?

Do you want the activity leader to carry the medication?

(use back of this page for additional information or explanation)

Date of last tetanus shot/booster: _____

Date of birth: _____

MEDICAL INSURANCE INFORMATION

Company: _____

Policy Number: _____

Parent's SS#: _____

Questions? Call Tom Arneberg or Darin Thomas, or see the www.troop72.com web page.