Activity: Klondike Derby!

Location: LE Phillips Scout Reservation

Dates: January 25-27, 2008
Departure: 5:30 p.m. Friday, CVBC
Est. Return: 11:30 a.m. Sunday, CVBC

COST: \$15.00 (\$7 for three meals; \$8 for klondike fee)

Emergency contact: Camp office, 715-234-1147 or Tom Arneberg's cell phone: 715-529-1536



Details: In the six-year history of Troop 72, we have NEVER gone to a Klondike Derby. We missed it last year due to a conflict with our reservations at Fred C. Andersen camp, and two years ago, it was cancelled due to lack of snow. Maybe the third time's a charm! A Klondike derby is an even where each troop or patrol pushes around a big sled that they made. The sled contains things like a First Aid kit, matches, blankets, knives, and pots. There are string-burning contests, sled races, ax skill tests, and boiling water – all outdoors, just like the real Klondike!

It will be held at Camp Phillips, about an hour's drive up Highway 53. We will be sharing the 40 bunks in the "barn" cabin with another troop – it has a wood stove, gas heat, and a kitchen, but outhouses. Two breakfasts and supper will be on our own, while the chili lunch will be served to all 200(?) of us at the Klondike Derby.

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	below with any money by 7:00 p.m. Monday, Jan. 14, 2008 . ble to come after that, for an extra \$5 late fee, if there's room.)
(cut here; return botton	n portion)
Klondike Derby at L.E. Phillips Scout R	eservation
Dates: January 25-27, 2008	
Fees: \$ from boy's account + \$	enclosed check - \$15.00
1 ccs.	(make checks payable to "Troop72.com")
	that the Boy Scouts of America is an educational institution, membership in which is ken to ensure the safety and well-being of my Scout son/ward, namely:
First	MiddleLast against the leaders of this trip, officers, agents and representatives of the Boy Scouts of
permission to obtain medical treatment for this Scout at the nearest herestricted 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 sco	
Signature of parent or guardian:	Date:
EMERGENCY INFORMATION: (In addition to Personal Health a During the activity listed above, I (parent/guardian) can be contacted	at the following phone number(s):
This scout is highly sensitive to:)
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)	
(p p p	
Date of last tetanus shot/booster:	Date of birth:
MEDICAL INSURANCE INFORMATION Company:	
Policy Number: Parent's Questions? Call Tom Arneberg (726-4074) or email (tom@arneberg.	s SS#:
Questions? Call Tom Arneberg (726-4074) or email (tom@arneberg.	.com) or see the www.troop72.com web page.