

Activity: Sleeping on a SUBMARINE!
Location: Manitowoc, Wisc.
Dates: March 4-5, 2011
Departure: 1:30 p.m. Friday, CVBC
Est. Return: 5-8pm(?) Saturday, CVBC
COST: \$48.00 (\$39/sub \$9/gas) **PLUS FOOD!**

Emergency contact: Maritime Museum, 866-724-2356
 or Tom Arneberg's cell phone: 715-404-0582



Details: We are going to SLEEP ON A WORLD-WAR II SUBMARINE! The U.S.S. Cobia sank thirteen Japanese warships in 1944, including one that was carrying tanks to Iwo Jima to kill American soldiers. We get to board the sub at 7:30 p.m. and sleep on it overnight. In the morning, we'll go out for breakfast and then return at 9:00 a.m. to the Maritime Museum for part of the day before returning home. We'll probably stop at Lambeau Field on the way home since we have to go right through Green Bay, although we won't be doing the tour or hall of fame as a group due to expenses.

Note that the cost is for the sub and gas only. **It DOES NOT INCLUDE FOOD!** You will need to bring some food to eat, or some extra money. Based on past experience, it is likely that the PLC will decide to stop at very cheap restaurants such as McDonald's. We'll need to eat Friday supper, Saturday breakfast and lunch, and probably Saturday supper on the road, so bring money for four meals. (If you are frugal and don't want to bring food from home, you can eat pretty well off the dollar menu for \$2 per meal if you get a couple burgers or sandwiches and drink water.) Note that REGISTRATIONS ARE LIMITED – first come, first served.

Retain the above information and return the form below with any money by 1:00 p.m. **Sunday, Feb. 20, 2011.**

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

Sleeping on a Submarine in Manitowoc

Dates: March 4-5, 2011

Fees: \$_____ from boy's account + \$_____ enclosed check = \$49.00
 (make checks payable to "Troop72.com")

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 (726-4074) or email (tom@arneberg.com) or see the www.troop72.com web page.