Activity: Winter Cabin Camping Location: Fred C. Andersen Scout Camp Dates: Feb. 28 - March 2. 2014 Departure: 5:30 p.m. Friday, CVBC Est. Return: 1:30 p.m. Sunday, CVBC **COST: \$22.00** (\$10 for four meals; \$12 for cabins) **Emergency contact:** Camp Ranger, 715-549-6641 or Tom Arneberg's cell phone: 651-560-5675 **Details:** We're heading back to "Fred C."! This time we'll be staying in "Shelter," large one-room cabins, one for the adults and one for all the Scouts. The Fred C. Andersen Scout Reserve is nestled in the scenic bluffs of the St. Croix River near Stillwater, about 90 minutes west of Chippewa Falls. We will NOT be able to park right next to the cabin, so plan for about 1/4 mile hike. (Wheeled carts and sleds will be available.) There will be plenty of time for hiking, fire-building, cave exploring, sledding, advancements, Boards of Review, etc. The Patrol Leader Council will be planning some type of troop activity for Saturday morning and/or afternoon. **NEW THIS TIME:** We're going to stop for lunch at McDonald's in Menomonie on the way home, so bring a few bucks for that. Retain the above information and return the form below with any money by 7:00 p.m. Monday, February 24, 2014. ----- (cut here; return bottom portion) ------Winter Cabin Camping at Fred C. Andersen Dates: Feb. 28 - March 2, 2014 Fees: \$____ from boy's account + \$___ enclosed check = \$22.00 (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: _____ Last___ First_ __ MI___ 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 medical form on file with the Troop. [] Yes, I will attend this activity with my son(s) [] Yes, I can drive the troop trailer to/from the campsite Signature of parent or guardian:_______ Date:______ **EMERGENCY INFORMATION ON FILE?** [] Yes, I have an updated medical form on file with the troop. [] No, I still have to fill out that medical form and get it to the troop. [] The following is new information since the medical form was filed: