TOUR AND ACTIVITY PLAN

Date Troo Unit No.	p/team	For office use Tour and activity plan No. Date received					
	***************************************		Date reviewed				
Description of tou	r or activity						
	te)						
Dates	to	Total days					
(Note: Speed or e	quired that the following informa xcessive daily mileage increases th re space is required. Include detai clude maps for wilderness travel as	ne possibility of accidents.) Attach iled information on campsites, ro	an addi-	Council stamp/signatures			
D-1-	Tra	vel	Mileage	Overnight stopping place (Chark if reservations are cleared.)			
Date	From	То	Timeage	(Check if reservations are cleared.)			
Type of trip:	Day trip Short-term camp (I Long-term camp (longer than 72 h	ess than 72 hours)	A Weekend ties	d, etc.) High-adventure base			
Party will consistYouth—	maleYouth—female	Party will travel by (check all tha					
activities. Youth P Adult leader response	<u>:tion training</u> . At least one registen rotection training is valid for two ye onsible for this group (must be at le	ed adult who has completed BSA \ ears from the date completed. east 21 years old):	outh Prote	ies. All registered adults must have complete ection training must be present at all events an			
				Member No			
City		State		Zip code			
Phone	Emai		\	Youth Protection training date			
	ader name(s) (minimum age 18, or						
Name		Age Scouting position					
Address				Member No			
Citv		State		Zip code			
Phone	Emai	1		Youth Protection training date			
	n additional names and informat						
	uipment will include a first-aid kit a						
	ll have in possession an <u>Annual He</u>						
maumicelane ave	cocured health records have h	een reviewed and adult leaders	nave rea	y, qualified and trained supervision is in pla d and are in possession of a current copy olved before the tour or activity date.			
Signa	nture: Committee chair or chartered organization rep		Signature: Adult leader				
	t of contact (not on tour)	Norman Emerit					
Name		PhoneEmail_					



Tour involves:	Swimming Wildernes Shooting	s or backcoun		arry <u>Wilderness Use Pe</u>		ts (attach <u>Flying F</u> orinciples of <u>Leave</u> 				
climbing/rappe	lards: Where selling is included	ed, then <u>Clim</u> l t and <u>Climb O</u> <u>)</u> . At least one ic First Aid are	o On Safely n Safely gue adult must recommend	ncluded in the progra must be followed. At idelines. At least one a t have completed <u>Plan</u> ded for all tours, and <u>W</u>	t least one persor adult on a pack over aning and Prepari Tilderness First Aid	n must be current vernighter must ha ing for Hazardous d is recommended	ave completed <u>E</u> Weather trainir	m any recognized <u>Jasic Adult Leader</u> ng for all tours and		
		Expiration	on date of co	mmitment card/trainin	g (two years from	completion date)				
	Name	Age	Youth Protection	Planning and Preparing for Hazardous Weather	BALOO (no expiration)	Climb On Safely	Safe Swim Defense	Safety Afloat		
	Name Age		CPR Certification/Agency		CPR Expiration Date	First-Aid Certif	First-Aid Certification/Agency E			
	Name	Age	NRA Instructor and/or RSO							
			No	Rifle Shoto	□ Rifle □ Shotgun □ Pistol (Venturing only) □ Range Safety Officer □ Muzzle-loading rifle □ Muzzle-loading shotgun					
			No	_ Rifle Shote	I Shotgun □ Pistol (Venturing only) □ Range Safety Officer oading rifle □ Muzzle-loading shotgun					
that arises ou councils that	t of an official engage in una	I Scouting acti uthorized acti	ivity as def vities are jed	general liability insur fined by the <u>Guide to</u> opardizing their insura	<u>Safe Scouting.</u> V Ince coverage. PL	Colunteers, units, EASE DO NOT PUT	chartered organ	RISK.		
travel outside	uirement of the the United St	e state in which ates. It is reco	ch the vehic mmended, to have a	operty damage insucted is licensed and combon however, that covera \$500,000 combined sincoverage carried by the coverage carried by the carried by the coverage carried by the coverage carried by the ca	nply with or excee ge limits are a \$1 ngle limit. In the	ed the requiremer 00,000 combined case of rented vel	its of the countr I single limit. An nicles, the requir	y or destination to y vehicle designed ement of coverage		
If the vehicle	to be used is d	lesianed to ca	rry more th	an 15 people (includir licy applies to drivers	na the driver), the	driver must have	a valid comme			
All vehicles II	sed in travel o	outside the Ur	ited States	must carry a public l ach an additional pag	iability and prope	erty damage liabi		olicy that complie		
Name					CDL expires					
						5				
			NUMBER OF SAFETY BELTS	DRIVER/OWNER	VALID DRIVER LICENS (Y or N	1 40	S EIGHERT MOORANCE COVERNOE			
MAKE	MODEL	YEAR		DRIVERYOWNER			Combined Single Limit			
			7,							
				V (2000)						

Climbing

Orientation flights (attach Flying Plan required)