

Hike Water Bike Camp Service Activity

Day Overnight Extended

EVENT NAME _____

Location: _____

Date Start: _____ **Date End:** _____
(Day of week & Date) (Day of week & Date)

DETAILS:

What you will learn: Camping Cooking Hiking Canoeing Cycling
 First Aid Other _____

Highlights: _____

Meeting Loc: _____ Return Loc: _____
 Meeting Time: _____ Return Time: _____
 Cost Estimate: _____

CHALLENGES:

All Invited Intermediate Advanced

Distance: _____ Max. Altitude: _____
 Prerequisites: _____

LEADERSHIP:

Sponsor: _____ Adult Leader #1: _____
 Patrol: _____ Adult Leader #2: _____
 Scout Leader: _____ HALTT Required: YES

SCOUT SIGN UP:

Last Day to Sign-up or Drop _____

Panda

Moose

Raccoons

Beaver

1 _____	1 _____	1 _____	1 _____
2 _____	2 _____	2 _____	2 _____
3 _____	3 _____	3 _____	3 _____
4 _____	4 _____	4 _____	4 _____
5 _____	5 _____	5 _____	5 _____
6 _____	6 _____	6 _____	6 _____
7 _____	7 _____	7 _____	7 _____
8 _____	8 _____	8 _____	8 _____
9 _____	9 _____	9 _____	9 _____
10 _____	10 _____	10 _____	10 _____

ADULT SIGN UP:

<u>Name</u>	<u>Drive? # Seats?</u>	<u>Name</u>	<u>Drive? # Seats?</u>
1 _____	_____	6 _____	_____
2 _____	_____	7 _____	_____
3 _____	_____	8 _____	_____
4 _____	_____	9 _____	_____
5 _____	_____	10 _____	_____