

**REGISTERED SCOUT APPLICATION FORM
FOR
THE ALAMO AREA COUNCIL
PHILMONT 2010 CONTINGENT**

Scout Requirements: Must be a registered Boy Scout, Venture, Varsity or Post member and be at least 14 years of age as of January 1, 2010 or completed the 8th grade at time of attendance and be at least 13 years of age and meet the dietary guidelines for height and weight recommendations from the U.S. Department of Agriculture. A copy of the guidelines is available with the Council receptionist. You may not attend Philmont in two consecutive years.

Fees: Deadline for applications with \$100 nonrefundable deposits is Wednesday, August 19, 2009. The 2010 Philmont Contingent Fee is budgeted at \$1150.00. One-third payments of \$350.00 are due at the Council receptionist on September 25, 2009, November 20, 2009 and February 12, 2010. A Scout who drops forfeits all fees paid to date. A direct replacement from your unit can replace you with no forfeiture of fees. Applications are processed on a first come basis. A waiting list is established on applications in excess of 144 campers.

2010 EXPEDITION DATES: JUNE 14 – JUNE 28
JULY 14 – JULY 28

APPLICATION INFORMATION (please print)

Date _____

Name _____

Address (Street) _____

City _____ State _____ Zip Code _____

E-Mail correspondence _____

Home Phone (include area code) _____ Current Rank _____ Current Grade _____

Date of Birth _____ Weight _____ Height _____

Unit Registration (Troop/Team/Crew/Post) _____ District _____

Philmont Experience (Yes/No) _____ Other High Adventure Experience _____

Leadership Positions in Scouting _____

Preferred Departure Date: June 14 _____ July 14 _____

Why would you like to attend Philmont Scout Ranch?: _____

**REGISTERED ADULT LEADER APPLICATION FORM
FOR
THE ALAMO AREA COUNCIL
PHILMONT 2010 CONTINGENT**

If you would like to serve as an Adult Leader (Trek Advisor) for one of our Council Contingent Treks at Philmont Scout Ranch in 2010, please complete the following information listed below about yourself and return this application to the Council Service Center (McGimsey Scout Park) with the Philmont nonrefundable \$100.00 deposit fee. Please bring your application and deposit to the registration desk to receive your paid receipt. You may not attend Philmont in two consecutive years. Crew size will be **12 campers**. Crews having less than 12 campers will be assigned additional campers to bring your total to 12 campers whenever possible. Crews are limited to four (4) adults. A camper who drops forfeits all fees paid to date. You may directly replace a camper within a unit with no additional charges.

Your deposit will remain attached to your application for 2 week until the council has processed your application. An acceptable application is based on space availability and meeting the current Dietary Guidelines for Americans from the U.S. Department of Agriculture for height and weight recommendations. A copy of these guidelines is available from the registration file folder located in the Council Service Center reception area.

Arrival dates at Philmont are June 15 and July 15, 2010. Seventy-two (72) campers will be arriving on the council Bus on each of these days.

Applications are being accepted on a first come first serve basis. When the applications exceed our 144 Scout and Advisor limit, your deposit will be returned to your attention and your application retained as a possible replacement for another adult. Whenever possible, the Advisers with Scouts from the same unit will be kept together on the same crew. One or two others from your District or an adjacent District may join your crew. To ensure the scouts will have a successful high Adventure, one Advisor per crew should have Philmont experience or equivalent. **Deadline for applications with \$100 nonrefundable deposits is Wednesday, August 19, 2009.**

The 2010 Philmont Contingent Fee for Scout or Scouter is budgeted at \$1150.00. One-third payments of \$350.00 are due at the Council office on September 25, 2009, November 20, 2009 and February 12, 2010.

APPLICATION INFORMATION (please print)

Name _____

Address (Street) _____

City _____ State _____ Zip Code _____

E-Mail correspondence _____

Home Phone (include area code) _____ Business Phone _____

Age _____ Weight _____ Height _____

Unit Registration (Troop/Team/Crew/Post) _____ District _____

Scouting Position _____

Philmont Experience (years) _____ Other High Adventure Experience _____

Preferred Departure Date: June 14 _____ July 14 _____



Open Climb Day!

Want to try out the High Adventure Sport of Climbing?

Join us at the McGimsey Climbing Tower for the day!

Any registered Boy Scout or Boy Scout Adult Leader is welcome to stop by the McGimsey Climbing Tower **October 17** (Rain date November 21) from 9 AM – 12 PM or 1 PM-4PM. You will be provided the opportunity to attempt to scale the McGimsey Tower.

No Deadline for registration! No limit or minimum members of your troop.
No experience or knowledge required. Climbing is challenge by choice.
First come, First Served, all day long.
Come out and get familiar with the climbing program.

Requirements:

We will charge \$5 per person. The attached 2009 Climbing Consent Form **must be** Completed for each participant.

Directions:

Enter the park and turn right after the Ranger Cottage. Park at the OA Lodge parking area and Continue to walk on the road after parking and turn right at the first possible road. Tower is approximately 150 feet in. You cannot miss us!

If you should have any questions please contact Dwayne Cloar, Council Program Director at 341-8611 ext. 142 or dcloar@bsaemail.org or Tom Krueger at 210-889-3993 or tkrueger1@satx.rr.com

Open Climb Day- 10-17-09

Name: _____ Unit: _____

Address: _____

Phone: _____ (home) _____ (work/cell)

E-Mail: _____

Climbing Experience: _____

**CHALLENGE COURSE and CLIMBING/RAPPELLING
HEALTH HISTORY AND CONSENT FORM
ADULT OR CHILD**

You are about to take part in a challenge ("ropes") course experience and or climbing/rappelling ("activity") offered through the _____ Council BSA ("local council") on _____ (date).

While participating in the activity you will undertake a wide variety of physical and mental challenges that are comparable to activities with which you may be more familiar. Much of the time, you will be engaged in activity of "moderate exertion," which is comparable to normal walking, golfing on foot, raking leaves, calisthenics, or slow dancing. For short periods of time, you will be engaged in activity of "vigorous exertion," which is comparable to fast walking, slow jogging, heavy gardening, or shoveling snow.

If any of the above activities are difficult for you, discuss your participation in the activity with your physician. If these are activities in which you regularly engage without difficulty, you should be fit for participation in the program.

Following are specific medical conditions about which participants should *always* seek the advice of a physician before participating in the activity:

- Pregnancy (climbing harness can injure uterus)
- Kidney or liver transplant (climbing harness can injure transplanted organ)
- Healing fracture or joint injury (should be cleared by treating physician)
- Recent surgery (should be cleared by treating physician)
- Down syndrome (should have x-ray check for neck instability, as per recommendation of the Special Olympics)

If you or your physician has any questions about the physical requirements of the activity, feel free to contact the local council.

HEALTH HISTORY

Name:		First		Middle		Last	
Telephone:		Home		Work			
Personal physician				Name		Telephone	
In case of emergency, please contact:				Name		Telephone	
Special dietary considerations:							
List known allergies:							
List required medications:							
If you are allergic to insect stings, do you have an insect sting kit (e.g., EpiPen)?							
Do you wear contact lenses?				Are you pregnant?			
Have you had or do you now have (circle if yes):				Heart attack		Diabetes	
Angina		Epilepsy		Chest pains		Drug reactions	
High blood pressure		Heart murmur					
If you answered "yes" to any of the above, explain and include date:							
Do you have any other medical conditions that we should be aware of?							

HOLD HARMLESS AGREEMENT

I understand that participation in the activity involves a certain degree of risk that could result in injury or death. In consideration of the benefits to be derived, after carefully considering the risk involved, and in view of the fact that the Boy Scouts of America is an organization in which membership is voluntary, I have carefully considered the risk involved and have given consent for myself (or my son or daughter) to participate in the activity, and waive all claims I or we may have against the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity.

I am not under the influence of any chemical substance, including alcohol. Understanding that any physical activity involves a risk of injury, I understand that my participation in the activity is entirely voluntary. I release the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity from any and all claims or liability arising out of this participation. This release does not, however, apply to any harm caused by negligence or willful misconduct of the local council or its employees.

In case of emergency involving my child, I understand every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the physician selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child.

Participant's signature* _____ Date _____

*If the participant is under age 18, his or her parent or guardian must also sign below:

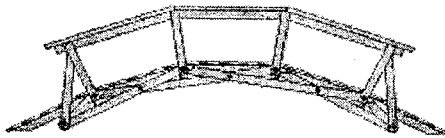
Parent's or guardian's signature _____ Date _____



Webelos to Scout Transitions Training:

Bridging and Retaining New Scouts

- ☞ Saturday, October 17th
- ☞ Registration starts at 8:30 a.m.
- ☞ Training will begin at 9:00 a.m.
- ☞ Training will end at 10:45 a.m.
- ☞ Alamo Area Scout Office Conference Room



Scoutmasters and Troop Committee Chairs!

Come to a special council-wide training designed to take the guesswork out of Webelos to Scout transitions, sometimes referred to as “bridging”, as outlined in the “Webelos to Scout Transitions” pamphlet published by the National Council.

We will focus on five areas:

- ☞ The progression of a transitioning boy the six months before his ceremony
- ☞ The steps for a successful ceremony and transition
- ☞ The six months to one year after he has joined his troop
- ☞ The key adults and youth leaders who are beneficial to his full transition
- ☞ The resources that are available to make the job of transitioning easier

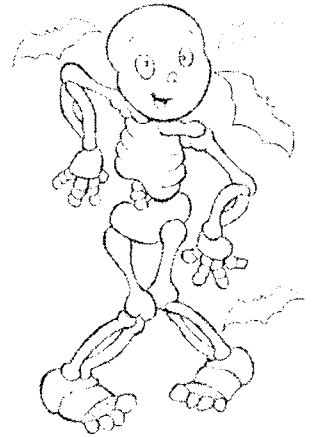
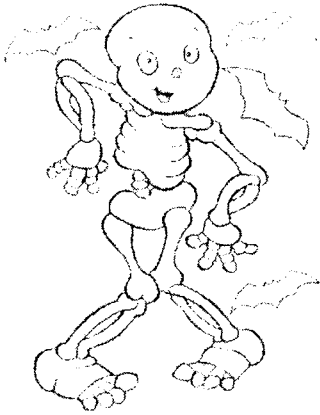
Who should attend?

- ✓ All Scoutmasters
- ✓ All Assistant Scoutmasters
- ✓ All 11-year old Scout Leaders
- ✓ All Troop Committee Chairs
- ✓ Any other Adult Leader from your troop who is directly involved with transitioning New Scouts

Please RSVP who will attend this training session to Lelen S. Jarman at 341-8611 Ext. 137 or e-mail at ljjarman@bsamail.org by 4:30 p.m., Thursday October 15th, 2009.

Refreshments will be provided.





Spook-O-Ree 2009

HELPERS NEEDED FOR

Cub Scout Family Camp-Out:

Session (circle one):

Nov. 6-7 (Fri-Sat) or Nov. 7-8 (Sat-Sun)

Each night we have a lot of fun stuff to do for the cubs and families:

A haunted trail

Hayride

Old-time carnival games

Gross pirate ship

And a lot more!

We need lots of help and you don't have to be there both nights, but if you can, all the better. If you are interested, please send this to Dwayne Cloar at the Alamo Area Council office or email Kim McKinstry at kimmee150@yahoo.com

Troop or Pack #(Circle One): _____ District: _____

Name: _____

Email: _____

Daytime phone: _____

Evening phone: _____

Registered Leader? Yes No



Volunteers can be either adults or Boy Scouts or at least 14 years of age and at least First Class.

Spook-O-Ree: Boy Scouts of America, Alamo Area Council

2226 NW Military Hwy, San Antonio TX 78213

210-341-8611 ext 142 or fax: 210-341-7641

Alamo Area Council Fall 2009

Merit Badge University

Where: Northwest Vista College

When: Saturday, November 14, 2009

7 a.m. registration 8:00 a.m. – 4:30 p.m. classes

Lunch details TBD at a later date

Troop Contact Registration: (REQUIRED) **online** beginning **August 24th**

Scout Registration: **ONLINE ONLY** beginning **September 14th**.

www.alamoarea-boyscouts.org

Fee: \$10.00 payable at Council **before October 30th**

Payments must be made in a single troop payment only.

Schedules cannot be changed after November 4th.

Merit Badges Offered

Animal Science *
Citizenship in the Community (E)
Citizenship in the Nation (E)
Citizenship in the World (E)
Collections
Communications (3) (E)
Computers (3)
Crime Prevention
Dentistry *
Electricity
Emergency Preparedness (3) (E)
Family Life (E)
Fingerprinting
Journalism
Law *
Music *
Nature
Nuclear Science
Pets
Public Health
Radio *
Space Exploration *
Scholarship

Counselors Needed!

Please check the list on the left and email Deb Cantu or Robert Via – Vice Chair
keystoneuc@satx.rr.com

Registration Limited!

More questions?

Email Deb Cantu - Chair

ArmadilloApplePie@satx.rr.com

Ted Borcharding – Staff Liaison

tborcher@bsamail.org

or Melissa Shiplett – Staff Liaison

mshiplet@bsamail.org

3 = 2 period class lasting 3 hours

E = Eagle required

* = extensive pre-requisites required

SCOUTMASTER APPROVAL IS REQUIRED FOR ALL MBU WORK. NO BLUE CARDS WILL BE ACCEPTED OR ISSUED. NEARLY ALL MERIT BADGES HAVE PRE-REQUISITES. PRE-REQUISITES CAN BE FOUND ON THE ALAMO AREA WEBSITE UNDER "ADVANCEMENT." PARTIAL CREDIT CAN BE EARNED IF ALL PRE-REQUISITES ARE NOT FINISHED.



ALAMO AREA COUNCIL
C.O.P.E. FACILITATOR TRAINING

C.O.P.E. is an Outdoor Experiential Education Program that leads to a physical challenge, psychological development, team building, personal growth, non-competitive games and initiatives, a “local” high & low element adventure. It’s learning by doing. We are looking for individuals to become a part of the Alamo Area Council C.O.P.E. team.

Leaders should:

- Be in good physical condition for climbing and belaying**
- Have safety minded judgment**
- Be compassionate, positive and enthusiastic**
- Must be at least 21 years old**
- Be able to make a commitment to attend at least 5 COPE events and attend safety meetings**

The training is to be held at McGimsey Scout Park.

Training Session Dates: **Friday, November 20 6:00 pm– 9:00 pm**
 Saturday, November 21 8:30 am – 5:00 pm
 Sunday, November 22 8:30 am – 5:00 pm

Applicants must attend all 3 days to be eligible as a COPE Facilitator.

A COPE Facilitator application is available on the back of this flyer. Please return the form and the \$15.00 registration fee, by Friday, November 13. If you have any questions please contact the COPE Advisor Dwayne Clear at 341-8611 ext. 142 or e-mail dclear@bsamail.org



AINA TOPA HUTSI LODGE

Order of the Arrow
Boy Scouts of America

SECOND ORDEAL INDUCTION STAFF & Members

December 4-6, 2009
McGimsey Scout Park
Check-in 6:00 to 9:00 PM Friday
at the Cub Country pavilion

Registration deadline is **November 25, 2009**

Name: _____ Unit #: _____

Address: _____ City: _____ ST: _____ Zip: _____

Phone: _____ CHAPTER (District): _____
AREA CODE first, please Armadillo, Cimarron, Diamondback, Longhorn, Memorial, Rough Rider, Summit, Texas Hills, Two Rivers, Victory

CELL: _____ E-mail (optional): _____

STAFF FEE & Mbrs. (includes all meals) ... \$10.00 _____

Elangomat fee (Candidate food only) \$5.00 _____

Brotherhood fee (Sash only, no meals) . . . \$15.00 _____

TOTAL PAID \$ _____

Make your check payable to -
ALAMO AREA COUNCIL and mail to
Alamo Area Council, BSA
Order of the Arrow
2226 NW Military Hwy
San Antonio TX 78213-1894

TALENT RELEASE

I hereby assign and grant to the Boy Scouts of America the right and permission to use and publish the photographs/film/video/electronic representations and/or recording made of myself and/or my child at this(ese) event(s) by the Boy Scouts of America, and I hereby release the Boy Scouts of America from any and all liability from such use and publication. I further authorize the reproduction, sale copyright, exhibit, broadcast, electronic storage and/or sound recordings without limitation at the discretion of the Boy Scouts of America and I specifically waive any right to any compensation I may have for any of the foregoing. Names and/or individualized identification shall be unintentional.

Yes No

Class 1 Personal Health & Medical History

THIS FORM IS GOOD FOR THIS EVENT ONLY

Any known medical problems: _____

All medications to be taken 30 days prior and/or at the event: _____

Activity and diet restrictions: _____

Date of Birth: _____ Age: _____ Sex: _____ Immunizations: (give date of last inoculation)

Name of Parent/Guardian: _____ Tetanus toxoid _____

Home Phone: _____ Business Phone: _____ Cell Phone: _____

Home Address: _____ City: _____ State: _____ Zip: _____

If person named above is not available in the event of an emergency, notify:

Name: _____ Relationship: _____ Phone: _____

Name of Personal Physician: _____ Phone: _____

Personal health/accident insurance: _____ Policy #: _____

OTHER NOTES: _____

In case of emergency, I understand that every effort will be made to contact me (if an adult age 18 or over, my spouse or next of kin). In the event that I cannot be reached, I hereby give my permission to the physician selected by the adult leader in charge to secure proper treatment including hospitalization, anesthesia, surgery, or injections of medication for my child (or for me, if an adult). Additionally, by signing below, I have read and agree to all event terms as stated on the event registration form above.

I approve the sharing of the information on this form with BSA volunteers and professionals who need to know of medical situations that might require special consideration for the safe conducting of Scouting activities

Date: _____ Signature of parent/guardian or adult: _____

