

Welcome to Day Camp in the Alamo Area Council. Our staff developed a fun and exciting program combining shooting sports, aquatics, and activities centered around our camp theme: STEM- Science, Technology, Engineering, and Math. Each camp highlights a different STEM focus making each week a new adventure!

Alamo Area Council offers day camps in three locations around the San Antonio area: Boerne, Canyon Lake, and McGimsey Scout Park. While each camp shares STEM-Camp theme, the daily program activities are unique.

Day Camp is open to all registered Cub Scouts. All scouts entering first through fifth grade are invited to attend Cub Scout Day Camp. Additionally, the Council also offers special experiences for our youngest members: Lion and Tiger Cub Scouts. Each have their very own summer experience planned, too.

Thank you for making Alamo Area Council Day Camp 2023 part of your summer adventure. If you have any questions about Day Camp, please contact us at Adventure@AlamoAreaBSA.org or at 210-243-5091.

Yours in Scouting,

# Vivian Schneider

Vivian Schneider Staff Advisor - Alamo Area Council Day Camp



ALAMO AREA COUNCIL 2226 NW Military Hwy San Antonio, TX 87213

Adventure@AlamoAreaBSA.org
Website - www.AlamoAreaBSA.org

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# **General Information**

### **REGISTRATION/CHECK IN**

At registration, the parents will turn in completed Health forms parts A and B. These can be found in the Resource section on the Day Camp registration page. Camp gear and den assignments will be given. Those that complete early registration may proceed directly to their dens on Monday.

#### MEALS AT DAY CAMP

Meals are NOT provided at camp. Please make sure campers are ready for their adventure with a complete breakfast before they arrive, as Scouts burn lots of energy while at camp.

Scouts should bring a complete lunch each day. Lunches will be placed and stored in coolers / camp walk-in cooler. Avoid sugary drinks as they attract bugs and bees. Pro Tip: Freeze a bottle of water the night before, and add it to your Scout's lunch sack. This will help keep food cool and will be a cold, refreshing drink at lunch.

## SIBLINGS AT CAMP

Unregistered siblings are not allowed at camp. All participants must meet the age limits and be registered members of the BSA.

## LOST AND FOUND

Items collected around camp will be placed in the Lost and Found box (for McGimsey Scout Park, this is found inside the White House). On Friday, items will be placed at the Council Office. All items not collected by July 14th will be donated to a local charity.

# Adults at Camp

# **ADULTS ATTENDING CAMP:**

Parents are welcome to experience camp with their Cub Scout. We do ask that you register for camp with your Scout. A current Youth Protection Training certificate and BSA Annual Health & Medical Record Parts A, B1, and B2 are also required for adults on the premises.

Adults are issued a wrist band to wear throughout the week showing they've completed necessary Youth Protection Training (YPT) and are registered. For the safety of our Scouts, any adult present without a wristband will be escorted from camp.

# **ATTENTION TIGER PARENTS**

Tiger Scouts must be accompanied by a parent or guardian while attending camp.

# **Medical Information**

All campers and adults need to have a current BSA Annual Health and Medical Record Part A & B on file with the medic while on camp. Please ensure that all participants have a current tetanus immunization. A copy of the insurance card should also be attached to the form. This form may be turned in before camp at the Council office, at preregistration, or on the first day of camp at check-in. Any medical issues or allergies should be reported to the medic BEFORE camp so the proper precautions can be taken.

Please check YES or NO and sign the "non-prescription medication administration is authorized" (i.e. Tylenol for headaches) on the Scout's medical form.

All prescription medication must come to camp in the original bottle from the pharmacy with the following information clearly labeled by the pharmacy:

- Camper's name
- Date of prescription
- Doctor's name and phone number
- Correct dosage

Medications will be kept with the camp medic and administered at the time indicated on the prescription label. Medications can be picked up daily or at the end of the week. Medications will be secured in a locked box while on camp. Inhalers and epi-pens must remain with the Scout or accompanying parent/guardian the entire day.



# **ON-SITE MEDICAL SERVICES**

If a camper is injured or becomes ill, the medic will provide first aid and assistance for the camper and contact the parent. Our clinic is only designed to treat minor injuries or minor heat-related illnesses.

# **Disabled Parking**

# MCGIMSEY SCOUT PARK

Handicap parking is available near the White House and at the pool area. Only vehicles with state issued Disabled Parking placards or license plates may park in designated Disable Parking areas. DV plates alone do not meet this requirement.

# **BOERNE & CANYON LAKE**

Handicap parking is marked in the general lot areas. These are the only options available.



# **Den Chiefs**

Den Chiefs must be under the supervision of a Scouts BSA Troop Leader, a Cub Scout Pack Leader or a Parent or Guardian who is a registered adult on-site.

Den Chiefs are required to submit a completed health form and a copy of their Den Chief training certification in order to participate as a Den Chief. Scouts may purchase an adult sized t-shirt during registration if they would like a shirt to wear at camp. No free shirts will be given.



#### **FOOTWEAR**

Closed-toe shoes are required for all areas except the aquatics area. Crocks are NOT closed-toe shoes. Campers attending day camp at McGimsey Scout Park are encouraged to wear Aqua Shoes or Socks while swimming as the bottom of the pool tends to be rough on swimmer's feet.

#### **LONG HAIR**

It is recommended that Scouts with medium to long have it tied back with a hair tie, bandanna, or by wearing their hat while on the ranges.

## **SUNSCREEN & INSECT REPELLENT**

Please apply sunscreen and send it with your Scout to use throughout the day. Depending on weather conditions, Scouts may want to use insect repellent, especially around knees and ankles. Skin-So-Soft works well.

Per Youth Protection Guidelines, staff cannot reapply sunscreen, or bug repellent to youth. Please make sure your Scout knows how to use these products without assistance.



# What Should Campers Wear?

#### **CAMP ATTIRE**

Campers are provided a camp t-shirt and hat for camp. For easy identification of our campers, these must be worn each day at camp.

## **SWIMWEAR**

The day camp program includes various activities including aquatics. We recommend that Scouts wear their swimming attire under their camp t-shirt. This allows Scouts of all genders to easily transition from field sports to aquatics quickly, making the most of their time in the water.

BSA requires modest swimwear to be worn in the aquatics areas by all Scouts and adults attending camp.

For boys, parents have found board shorts the best option. The lightweight fabric is a cooler option to denim or cargo shorts and can be worn throughout the day. Many campers wear a swim shirt while in the pool for sun protection.

For girls, parents have found one-piece suits to be cumbersome, and instead found a number of suitable options in contemporary swimwear that make day camp a breeze: swim short sets, swim shirts, or modest tankini's with a brief-style bottom work well to accommodate the needs of female campers. Shorts can be pulled on over swim bottoms and worn for other day camp activities.

T-shirts cannot be worn in the pool.

Flotation devices and life vests are provided for Scouts.\*

\*McGimsey Scout Park and Boerne camps, only



# **LUNCHES**

Please do not use insulated bags for lunches - use a gallon sized zip-loc with your camper's name clearly written on the front instead. If we all do this, we'll have plenty of room in our ice chests. We recommend freezing a water bottle the night before and place it in the bag with their lunch.

## LEAVE WATER BOTTLES AT HOME

Campers will be given a water cup and water will be provided - no need for a personal water bottle.

# What to Bring to Day Camp

MAKE SURE TO MARK ALL ITEMS WITH SCOUT'S NAME

#### **MUST HAVES**

Closed toe shoes (no crocks)
Day pack\*
Swim towel
Water bottle filled with water
Camp Cup\*
Camp t-shirt and hat\*
Lunch
Sunscreen

\* These items are issued at check-in

#### **OPTIONAL**

Swim goggles
Carabiner
(to attach water cup/bottle to day pack)
Afternoon snack
Aqua Shoes/Socks
Money for the Trading Post
Hair tie/bandanna
Insect repellent

#### ITEMS TO LEAVE AT HOME

Knives/pocketknives
Fireworks
Music Devices
Skateboards & scooters
Valuables
Electronic games
Pets
Alcohol and illegal drugs
Tobacco or vaping products

#### **RECOMMENDED FOR ADULTS**

Camera

(Email your pics & video clips to Scouting@AlamoAreaBSA.org)

Black Permanent Marker (To write Scout name on belongings)

## PRO TIP:

Encourage your Cub Scouts to carry their own belongings. It builds confidence, responsibility, and self reliance!







# Youth Protection

Camper safety is a top priority at Day Camp. To ensure that our youth are protected, we have the following in place:



- & Buddy System: No Scouts should be without a buddy at camp.
- No one-on-one contact between adults and youth or older youth and younger youth.
- separate bathrooms for youth and adults. Facilities for youth only and adults only will be clearly marked.
- 💠 All adults staying on camp must show proof of current BSA Youth Protection Training.



WHAT TO EXPECT AT CAMP: Our day starts with a Flag Ceremony and overview of the planned activities. Campers will participate in 3-4 activities in the morning program schedule.

McGimsey Scout Park has a Trading Post open at lunch and some days after camp selling snacks, small camp items and t-shirts. Please do not send your camper with more than \$5.

During the afternoon program, campers rotate through 3-4 new adventures before Cub Scout Day Camp's daily Closing Ceremony.



Throughout the week, we will have special activities. Watch for more information about these events and other camp activities through the email you provided at registration.

# Camp Details for McGimsey Scout Park Day Camp

## **DROP OFF**

Day Camp begins at 8:00 am each day. Please do not drop off your Scout before 7:45 am. Scouts should be escorted from the parking area by their parent and checked-in with their Den Walker. Please make sure the Scout's lunch is safely stowed in the proper cooler prior to the parent leaving.

#### LATE ARRIVALS

If your scout is running late, please check them in at the White House. Camp personnel will walk them to the program area. Please do not take them to the program area without checking in.

#### **PICKUP**

Pick up is at 3:00 pm. For the protection of our Scouts, parents need to park their car and walk to the White House gathering area and wait for their child to complete camp activities. Parents are NOT permitted to enter the program area. Every Scout must be checked out with their Den Walkers before leaving the grounds. Be prepared to show your Photo ID to sign out your Scout. If you are attending camp with your Scout, you still need to officially signed them out from with the Den Walker at the White House gathering area.

#### **EARLY DISMISSAL**

If you need to pick up your scout before camp is finished, you may check them out at the White House. A sign in/out sheet is available at the counter.

#### **PARKING**

Parking is available across from the tepees. See page 4 for requirement for disabled parking.

#### TRANSPORTATION AT CAMP

For the safety of our Scouts, camp traffic proceeds one-way during day camp. Drivers can enter McGimsey Scout Park through the Cub Pavilion Gate off of Wedgewood Drive (the first gate after the council offices) and must exit the camp through the gate off NW Military. Only authorized staff vehicles are allowed to access other areas of the park during program hours.

#### AFTER-CAMP SWIM LESSONS

After-Camp Swim Lessons are available for an additional fee as an add-on option during McGimsey Day Camp registration. Registration is required and space is limited. Registered campers will be escorted to the aquatics area by staff members following day camp's closing ceremony. Parents must pick up their child at the pool promptly at 4:00 pm. Waiting children will be taken to the After-Camp Care program where a \$22.00 fee will be applied for the additional service. This fee is due at the time the child is picked up, and exact change is required. We strongly suggest that parents register their Scouts up for both After-Camp Swim Lessons and After-Camp Care if parents are unable to reliably arrive by 4:00 pm.

## **AFTER-CAMP CARE**

After-Camp Care is available for an additional fee as an add-on option during McGimsey Day Camp registration. After camp ends promptly at 6:00 pm. During After-Camp Care kids participate in games and activities, or watch movies. A snack is provided. A late fee of \$10 per half hour will apply to any Scout waiting after 6:00 pm, and will be collected when the parent arrives. Exact change is required.

NOTE: After-Camp Swim Lessons and After-Camp Care are two different services. Scouts registered for one are NOT automatically registered for the other. If you wish your Scout to participate in both programs, they MUST be registered for both, and satisfy the full registration rates for both.



# WHAT TO EXPECT AT CAMP:

Make the most of camp by participating in our Science theme dress up days.

Monday: Crazy Hats

Tuesday: Mad Scientist Hair

Wednesday: Science Socks

# Thursday: Be a Scientist.

Campers are required to wear their camp t-shirt every day, but dress it up with, binoculars, patches, or other props to identify your chosen field of study!

Closing Ceremony will be Thursday 2:45 - 3:30. The Kona ice truck will be at the Closing Ceremony and each camper, staff and volunteer will be treated to an ice. Additional ices for parents are \$3 each

# Camp Details for Canyon Lake Scout Day Camp

COMAL PARK 1178 COMAL PARK RD CANYON LAKE, TX 78133

#### **IMPORTANT PHONE CONTACTS:**

Christine Henley, Day Camp Director - 210-392-8223 Vivian Schneider, Alamo Area Council - 210-243-5091 Tori Metcalf, Alamo Area Council - 210-305-3017

#### DROP OFF -

## MONDAY:

Day Camp check in begins at 12:00pm. Do not drop off your Scout, but walk them to the check-in table. On our first day, our Camp Staff will need to verify your Scout's name, emergency contact information, pick-up plan, and to collect the completed BSA Annual Health Form parts A&B, and parent agreement forms. This is when your Scout will receive their participation bag, T-shirt, and den assignment. Please make sure the Scout's lunch is safely stowed in the proper cooler prior to the parent leaving.

#### **TUESDAY - FRIDAY**

Day Camp check in begins at 9:00am. Parents who checked in with all the appropriate paperwork can pull into the parking area and drop their campers off. For safety, please don't let campers of out the car until you reach the registration tent.

## LATE ARRIVALS

If your scout is running late, please wait with them at the check-in table. Camp personnel will walk them to the program area. Please do not take them to the program area without checking in

#### **PICKUP**

Pick up is at 3:30 pm. In the Camper's Welcome Packet, you will be provided with a sign to write your camper's name on. Bring that sign with you each day for pick-up. When you turn onto the gravel road, there will be a volunteer with a two-way radio. Show them your sign so they can radio ahead and have your camper ready for pick-up. For safety, you will need to show your sign and driver's license to pick up your camper. Parents are NOT permitted to enter the program area. If you are attending camp with your Scout, you still need to officially signed them out.

#### **EARLY DISMISSAL**

If you need to pick up your scout before camp is finished, you may check them out from the check out table. Parents are NOT permitted to enter the program area.

#### **SWIMMING**

Swimming will be offered at camp Tuesday -Thursday. Send campers wearing a swimsuit under their camp shirt and shorts, as there are no changing areas available. A modest tankini suit or rash guard usually functions best for girls. The aquatics program will be in the lake and life jackets are not provided. Their swim area will be cordoned off with buoys on a line and life guards will be present at all times.

#### BRING SOMETHING TO SIT ON

Campers can use their swim towel or you can send a small hand towel for them to sit on the grass. They really need a barrier between them and the grass to prevent any discomfort from the grass and ants, etc.



WHAT TO EXPECT AT CAMP: Day Camp is for Scouts entering 1st-5th grades during the 2023-24 school year.

Each day of camp we will play games, make crafts, learn skills and most important have fun! Scouts will earn their rank specific shooting sports patch in archery and BB gun.

Day Camp will be held at Boerne City Park at the Agricultural Museum and Arts Center. Founded in 1986, the "Ag Museum" offers visitors an enjoyable learning experience about farming history and is also a fantastic place for Scouting adventures.

# Camp Details for Boerne Cub Scout Day Camp

THE AGRICULTURAL HERITAGE MUSEUM 102 CITY PARK RD BOERNE, TX 78006

#### **IMPORTANT PHONE CONTACTS:**

Carolyn Clary, Camp Director - 830-370-1828 Dianna Miller, Program Director - 830-377-8804 Vivian Schneider, Alamo Area Council - 210-243-5091 Tori Metcalf, Alamo Area Council - 210-305-3017

## **DROP OFF**

Day Camp begins at 8:30 am each day. Camp Staff will be ready to check in your Scout beginning at 8:00am. Do not drop off your Scout, but walk them to the check-in table. On our first day, our Camp Staff will need to verify your Scout's name, emergency contact information, pick-up plan, and to collect the completed BSA Annual Health Form parts A&B. This is when your Scout will receive their participation bag, T-shirt, and den assignment. Please make sure the Scout's lunch is safely stowed in the proper cooler prior to the parent leaving.

#### LATE ARRIVALS

If your scout is running late, please wait with them at the check-in table. Camp personnel will walk them to the program area. Please do not take them to the program area without checking in.

#### **PICKUP**

Pick up is at 3:30 pm. For the protection of our Scouts, parents need to park their car and walk to the registration table to show their photo ID, and wait for their child to be called. On day 2 and 3 of camp, check out will be conducted at the Boerne City swimming pool gate, but the procedure will the otherwise the same. Parents are NOT permitted to enter the program area. If you are attending camp with your Scout, you still need to officially signed them out.

#### **EARLY DISMISSAL**

If you need to pick up your scout before camp is finished, you may check them out from the check out table. Parents are NOT permitted to enter the program area.

## **PARKING**

Parking is available in the Agricultural Heritage Museum parking lot.

## SWIMMING (DAY 2 & 3)

Swimming will be offered on day 2 and 3 of camp. Swimsuits are encouraged to be worn all day on these days to cut down on changing time and to keep with Youth Protection rules in the pool area. A modest tankini suit or rash guard usually functions best for girls. Scouts will be wet at pick up so prepare accordingly.

# Part A: Informed Consent, Release Agreement, and Authorization



Full name:		High-adventure base participants:
Date of birth:		Expedition/crew No.:
		or staff position:
Informed Consent, Release Agreement, and Authorization  I understand that participation in Scouting activities involves the risk of personal injury, including death, due to the physical, mental, and emotional challenges in the activities offered. Information about those activities may be obtained from the venue, activity coordinators, or your local council. I also understand that participation in these activities is entirely voluntary and requires participants to follow instructions and abide by all applicable rules and the standards of conduct.	authorize videotape Scouting coordinat with the a	reby assign and grant to the local council and the Boy Scouts of America, as well as their ed representatives, the right and permission to use and publish the photographs/film/es/electronic representations and/or sound recordings made of me or my child at all activities, and I hereby release the Boy Scouts of America, the local council, the activity itors, and all employees, volunteers, related parties, or other organizations associated activity from any and all liability from such use and publication. I further authorize the tition, sale, copyright, exhibit, broadcast, electronic storage, and/or distribution of said
In case of an emergency involving me or my child, I understand that efforts will be made to contact the individual listed as the emergency contact person by the medical provider and/or adult leader. In the event that this person cannot be reached, permission is hereby given to the medical provider selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for me or my child. Medical providers are authorized to disclose protected health information to the adult in charge, camp medical staff, camp management, and/or any physician or health-care provider involved in providing medical care to the participant. Protected Health Information/Confidential Health	photogra at the dis any of the Every per of the par	stion, sale, copyright, exhibit, productast, electronic storage, and/or distribution of sald aphs/film/videotapes/electronic representations and/or sound recordings without limitatio scretion of the BSA, and I specifically waive any right to any compensation I may have for the foregoing.  Person who furnishes any BB device to any minor, without the express or implied permission arent or legal guardian of the minor, is guilty of a misdemeanor. (California Penal Code 19915[a]) My signature below on this form indicates my permission.
Information (PHI/CHI) under the Standards for Privacy of Individually Identifiable Health Information, 45 C.F.R. §§160.103, 164.501, etc. seq., as amended from time to time, includes examination findings, test results, and treatment provided for purposes of medical evaluation of the participant,		rmission for my child to use a BB device. (Note: Not all events will include BB devices.)
follow-up and communication with the participant's parents or guardian, and/or determination of the participant's ability to continue in the program activities.	☐ Chec	cking this box indicates you DO NOT want your child to use a BB device.
(If applicable) I have carefully considered the risk involved and hereby give my informed consent for my child to participate in all activities offered in the program. I further authorize the sharing of the information on this form with any BSA volunteers or professionals who need to know of medical conditions that may require special consideration in conducting Scouting activities.  With appreciation of the dangers and risks associated with programs and activities, on my		NOTE: Due to the nature of programs and activities, the Boy Scouts of America and local councils cannot continually monitor compliance of program participants or any limitations imposed upon them by parents or medical providers. However, so that leaders can be as familiar as possible with any limitations, list any restrictions imposed on a child participant in connection with programs or activities below.
own behalf and/or on behalf of my child, I hereby fully and completely release and waive any and all claims for personal injury, death, or loss that may arise against the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with any program or activity.	List part	ticipant restrictions, if any:   None
I understand that, if any information I/we have provided is found to be inaccurate, it may limit and/Philmont Scout Ranch, Philmont Training Center, Northern Tier, Sea Base, or the Summit Bechtel Re and weight requirements and restrictions, and understand that the participant will not be al met. The participant has permission to engage in all high-adventure activities described, except as parent or guardian's signature is required.	serve, I hav	ive also read and understand the supplemental risk advisories, including height participate in applicable high-adventure programs if those requirements are not
Participant's signature:		Date:
Parent/guardian signature for youth:		Date:
(If participant is und	er the age of	f 18)
Complete this section for youth participants only:  Adults Authorized to Take Youth to and From Events:		
You must designate at least one adult. Please include a phone number.		
Name:	Name: _	
Phone:	Phone: _	
Adults NOT Authorized to Take Youth to and From Events:		
Name:	Name: _	



Full name	:		ŀ	High-adventure base participants:			
Date of birth:			Expedition/crew No.:				
Date of bil	· ui.		C	or staff position:			
Age:	Gender:	Height (inches):		Weight (lbs.):			
Address:							
Citv:	State:	ZIF	Рсс	code: Phone:			
				Unit leader's mobile #:			
	No.:						
Health/Accident	t Insurance Company:		_	Policy No.:			
Please	e attach a photocopy of both sides of the insurance card. If you	do not have medical insu	urai	ance, enter "none" above.			
In case of en	nergency, notify the person below:						
Name:			_Re	Relationship:			
Address:		Home phone:	:_	Other phone:			
Alternate contac	ct name:		_ /	Alternate's phone:			
Health H	iotory						
	y have or have you ever been treated for any of the following?						
Yes No	Condition			Explain			
	Diabetes	Last HbA1c percentage	and	and date: Insulin pump: Yes 🗆 No 🗆			
	Hypertension (high blood pressure)						
	Adult or congenital heart disease/heart attack/chest pain (angina)/ heart murmur/coronary artery disease. Any heart surgery or procedure. Explain all "yes" answers.						
	Family history of heart disease or any sudden heart-related death of a family member before age 50.						
	Stroke/TIA						
	Asthma/reactive airway disease	Last attack date:					
	Lung/respiratory disease						
	COPD						
	Ear/eyes/nose/sinus problems						
	Muscular/skeletal condition/muscle or bone issues						
	Head injury/concussion/TBI						
	Altitude sickness						
	Psychiatric/psychological or emotional difficulties						
	Neurological/behavioral disorders						
	Blood disorders/sickle cell disease						
	Fainting spells and dizziness						
	Kidney disease						
	Seizures or epilepsy	Last seizure date:					
	Abdominal/stomach/digestive problems						
	Thyroid disease						
	Skin issues						
	Obstructive sleep apnea/sleep disorders	CPAP: Yes □ No □					
	List all surgeries and hospitalizations	Last surgery date:					



List any other medical conditions not covered above

Full name: \_\_

High-adventure base participants:

Expedition/crew No.:

Allergies / Medications 10 YOU USE AN ASTYMA RESCUE	Date of birth:					or staff position:						
Vis    No    Allergies or Reactions   Explain   Vis    No    Allergies or Reactions   Explain	DO YOU USE A	AN EPINEPHRINE	□ YE						☐ YES	□ NO		
Medication   Food   Insulation   Paints   Insulation   Food   Insulation   Insula	Are you allergic t	to or do you have ar	ny adverse reaction to any of the	following?								
Sist all medications currently used, including any over-the-counter medications.	Yes No	Allergies or F	leactions	Explain	Yes	No	Allergies or Rea	actions	Explain			
Ist all medications currently used, including any over-the-counter medications.    Check here if no medications are routinely taken.		Medication					Plants					
Medication   Dose   Frequency   Reason		Food					Insect bites/stings					
VES	List all medic	cations currently	y used, including any over	r-the-counter medi	ications.							
YES	☐ Check he	re if no medicat	tions are routinely taken.	☐ If additi	onal space is ne	eded,	please list on a	separate sheet an	id attach.			
Administration of the above medications is approved for youth by:    Parent/guardian signature		Medication	Dose	Dose Frequency				Reason				
Administration of the above medications is approved for youth by:    Parent/guardian signature												
Administration of the above medications is approved for youth by:    Parent/guardian signature												
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Administration of the above medications is approved for youth by:    Parent/guardian signature												
Administration of the above medications is approved for youth by:    Parent/guardian signature												
Bring enough medications in sufficient quantities and in the original containers. Make sure that they are NOT expired, including inhalers and EpiPens. You SHOULD NOT STOP taking any maintenance medication unless instructed to do so by your doctor.				ion is authorized with th	ese exceptions:							
Bring enough medications in sufficient quantities and in the original containers. Make sure that they are NOT expired, including inhalers and EpiPens. You SHOULD NOT STOP taking any maintenance medication unless instructed to do so by your doctor.    Immunization	Administration o	f the above medicat	ions is approved for youth by:		/							
mmunization The following immunizations are recommended. Tetanus immunization is required and must have been received within the last 10 rears. If you had the disease, check the disease column and list the date. If immunized, check yes and provide the year received.    Yes   No   Had Disease   Immunization   Date(s)			Parent/guardian signature			MD/	DO, NP, or PA signature	(if your state requires signa	ature)			
mmunization The following immunizations are recommended. Tetanus immunization is required and must have been received within the last 10 rears. If you had the disease, check the disease column and list the date. If immunized, check yes and provide the year received.    Yes   No   Had Disease   Immunization   Date(s)												
The following immunizations are recommended. Tetanus immunization is required and must have been received within the last 10 loears. If you had the disease, check the disease column and list the date. If immunized, check yes and provide the year received.    Yes   No					s. Make sure that t	ney are l	NOT expired, includi	ing inhalers and EpiPe	ns. You SHOULD I	NOT STOP taking		
The following immunizations are recommended. Tetanus immunization is required and must have been received within the last 10 loears. If you had the disease, check the disease column and list the date. If immunized, check yes and provide the year received.    Yes   No	· ·											
Please list any additional information about your medical history:    Ves   No   Had Disease   Immunization   Date(s)												
Tetanus  Tetanus  Pertussis  Diphtheria  Measles/mumps/rubella  Polio  Chicken Pox  Hepatitis A  Hepatitis B  Meningitis  Influenza  Other (i.e., HIB)							eceived.   Plea		nal information	n about your		
Pertussis  Diphtheria  Measles/mumps/rubella  Polio Chicken Pox Hepatitis A Hepatitis B Meningitis Influenza Other (i.e., HIB)  Do NOT WRITE IN THIS BOX. Review for camp or special activity. Reviewed by:  Date:  Further approval required:   Yes   No   Reason:  Approved by:  Approved by:	Yes No	Had Disease	Immunizat	ion	Date	(s)	med	dical history:				
Diphtheria  Measles/mumps/rubella  Polio  Chicken Pox  Hepatitis A  Hepatitis B  Meningitis  Influenza  Other (i.e., HIB)			Tetanus									
Measles/mumps/rubella  Polio  Chicken Pox Hepatitis A  Hepatitis B  Meningitis Influenza Other (i.e., HIB)			Pertussis									
Polio  Chicken Pox  Hepatitis A  Hepatitis B  Meningitis  Influenza  Other (i.e., HIB)  Do NOT WRITE IN THIS BOX. Review for camp or special activity. Reviewed by:  Date:  Further approval required: Yes No Reason:  Approved by:  Approved by:			Diphtheria									
Review for camp or special activity.  Reviewed by:  Hepatitis A  Hepatitis B  Meningitis  Influenza  Other (i.e., HIB)			Measles/mumps/rubella									
Chicken Pox Hepatitis A  Hepatitis B  Meningitis Influenza Other (i.e., HIB)  Reviewed by:  Date:  Further approval required: Yes No  Reason:  Approved by:			Polio									
Hepatitis A  Hepatitis B  Meningitis  Influenza  Other (i.e., HIB)  Date:  Further approval required: Yes No  Reason:  Approved by:			Chicken Pox						vity.			
Hepatitis B  Meningitis  Influenza  Other (i.e., HIB)  Hepatitis B  Further approval required: Yes No  Reason:  Approved by:			Hepatitis A				Hevie	емей ру:				
Meningitis  Influenza  Other (i.e., HIB)  Further approval required:  Yes No  Reason:  Approved by:			Hepatitis B							1		
Influenza Other (i.e., HIB) Reason: Approved by:									Yes	l No		
Other (i.e., HIB)  Approved by:			-									
							Appr	oved by:				
EXEMPLE OF THE PROPERTY OF THE				form required)			Date	:				



# **SUPERVISION - ASSESSMENT - FITNESS AND SKILL - EQUIPMENT AND ENVIRONMENT**

# NATIONAL CAMP STANDARDS

Cub Scout Day Camps are inspected annually by a team that represents the Boy Scouts of America. The Camp meets or exceeds all standards and regulations. We are also inspected regularly by the Texas Health Department. We feature a Health Lodge staffed by a qualified professional provider for routine health checks and problems. Strict health and safety standards are maintained at all times.





