

# Camp John H. Ware 3<sup>rd</sup> Boy Scout Camp 2007 Leader's Guide



50 Years

Chester County Council  
Boy Scouts of America

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# Letter of Welcome

Dear Fellow Scouter,

Welcome to Camp John H. Ware 3<sup>rd</sup>. Camp is an exciting place for your scouts and you to make new friends, to learn scout skills, and to have fun!

This year we are introducing a new program. Designed for seasoned older scouts, this program combines orienteering and backpacking merit badges with leave no trace principles and culminates with a challenging hike, overnight outpost and service project. We will provide tents, stoves, food and guides. You provide Boy Scouts, personal gear, backpack and leader.

Please use this guide as a pre-camp reference to prepare for your camping experience and to answer your questions before you arrive at camp. Both parents and leaders will find the material informative, timely, and helpful in planning for their sons/scouts camping experience.

The Camp Ware staff is prepared to offer an outstanding, exciting camping program for your Scouts. Many familiar faces will be back on staff.

Please contact Maureen Milman at the council office to reserve your spot or to answer any questions regarding camp this summer... (610)696-2900 X 25

See you at camp!

Jim Montich Camp Director

Meridith Barrett Program Director

# Coming to Camp Ware

## Pre-Camp Orientation

**There is a meeting for all Scoutmasters Tuesday at 7 PM prior** to your week of summer camp; the topic of discussion will be program schedules and general camp business. **If you wish to join the staff for dinner**, please notify them before noon of that day by calling (717-548-2786) dinner is at 6 PM and it is **FREE OF CHARGE** If you have your activity sheets available at this time, they may be handed in. Please be sure to bring with you copies of your troop's medical records and a troop roster. This meeting represents an excellent opportunity for leaders to ask questions and meet the camp staff. In addition, any changes in the program that have been published in this guide will be discussed, including possible additions and revisions of the merit badge schedule. *All troop activities will be scheduled and discussed during the Sunday evening Scoutmaster's meeting upon your arrival at camp.*

***Any special needs (i.e. food requirements, sleeping, medical) will be discussed at this time.***

## Medical forms

Each leader must check in at the Headquarters building upon arriving at camp. Complete health forms (photocopies acceptable) need to be turned in to the health officer at this time. All forms become a part of permanent camp records and are not returnable, make sure you have copies for your files.

Youth and adult leaders under the age of 40 must have a physical exam within the past 36 months using the class 1 & 2 medical record form. All youth 18 and under, updated forms must be signed by a parent/guardian and dated within (1) year of the Troops scheduled week at camp. This form is valid for 36 months from the date of Health-Care Practitioner signature. All leaders over the age of 40 must submit a Class 3 physical. Class 3 physicals are only good for 12 months from the date of the Health-Care Practitioner's signature. We will accept, High Adventure medical forms, (Philmont, Sea Base, Jamboree, etc.)

## Camp fees

**Full fees are \$255.00/wk discounted at 240.00/ for Scouts and \$135.00 wk. discounted at \$120.00/wk for Leaders, if payment is received by June 1.** Two registered leaders are required to be present in camp with the unit at all times. This is for the safety and protection of your Scouts, so there is no exception to this rule. A \$50.00 Stake-A-Claim fee secures your choice of week and site until March 31. This is a site fee only and not included in the Scout or leaders fees. **A \$25.00 per camper deposit is due March 31, securing your choice of week and site. Units failing to meet these deadlines will no longer have a valid claim to their site, and it may be given up to another troop that pays the required fee.**

## Final Fees

**Payments must be received in full from all troops by June 1. Units failing to make the final, completed, payment by this due date, will lose their discounted. The business manager will adjust your troop account at check out.**

### ***Refunds (See Chester County Council Boy Scout Resident Camp Refund Policy)***

The \$50.00 Stake-A-Claim deposit is non-refundable (site fee only and not included in other fees)

The \$25.00/Campers deposit is non-refundable but is transferable within the troop and becomes part of the final fees. All Scouts/leaders listed on the roster will be charged the \$25.00 fee. Make sure your roster is correct.

A Scout/Leader who attends camp and must leave early due to illness, injury, or family emergency will be charged a prorated fee and receive a partial refund. Leaving for other reasons you will be charged a \$50.00 cancellation fee (see refund policy.)

A Scout/Leader who cancels out of camp after paying in full must submit in writing his reasons for doing so., His refund will be at the discretion of the Council Camping Department, minus the \$50.00 cancellation fee, and the \$25 per camper fee (see refund policy).

All refund requests must be in writing and submitted to the Camping Department before August 31. Refund requests received after this date will not be accepted. (See Boy Scout Resident Camp Refund Policy)

## What to bring

– A list useful when packing for summer camp

<b>Clothing and Bedding:</b>		<b>Optional Items:</b>	
Scout Uniform (Class A and B)		Flashlight	
Sweater or Jacket		Pocket knife (no sheath knives)	
Swim trunks		Spending money (suggested \$50)	
Sturdy pants (jeans)		Fishing gear	
T- Shirts		Sunglasses	
Raincoat or poncho		Compass	
Tennis shoes		Camera and film	
Socks (lots)		Water bottle	
Hiking boots		Spare batteries	
Sleeping bag with pillow		Day pack / Fanny pack	
<b>Toilet articles:</b>		<b>Troop Gear:</b>	
Toothbrush/ toothpaste		Alarm clock	
Washcloth		Flag	
Soap			
Deodorant		Cooler	
Towel		<b>Available from Quartermaster:</b>	
Comb and/or brush		Garden hose	
Sunscreen		Cooking utensils	
<b>Advancement Materials:</b>		Cook kits	
Your Scout Handbook		Cleaning supplies	
<b>(Put your name and troop # in books)</b>		Trash bags	
Pens and Pencils		Rakes and shovels	
Notebook with paper		Dutch ovens	
		Toilet paper	

**\*Make sure to label all personal equipment and clothing with the name and unit number of the owner – Camp John H. Ware III is not responsible for lost or stolen items \***

## What NOT to bring

– Leave this stuff at HOME!

Items listed below, may be confiscated, or, if deemed necessary, the owner may be asked to leave the Horseshoe Scout Reservation. Camp John H. Ware III and Chester County Council reserve the right to enforce the prohibition of these items on camp property.

- Hunting and sheath knives
- Fireworks and Firecrackers
- Bicycles
- **Alcoholic Beverages**
- Firearms and Ammunition
- Radios, video games, and all electronic equipment
- Pets
- 



## Check-in procedure

- **Check-in begins at 2pm on the day of your arrival.**
- **Please, in order to allow the Camp Ware staff proper time to prepare for your unit, *plan to arrive no earlier than 2pm or later than 2:30pm.***
- **Every camper present must have a valid physical form and all camp fees paid.**

Once parked, please send one person per unit with your roster to headquarters to check-in. **Make sure all who are in attendance are on the roster and all who are not in attendance are crossed off of the roster as all who appear on the roster will be charged the camp fee.** It is important that we have a correct head count of every camper and leader, and whether he or she is full or part-time. Upon completion of check-in, your guide will take your unit to your designated campsite to unpack and prepare for swim checks. Depending on the size of your unit, you may be asked to share a campsite with one or more other units in order to accommodate everyone in camp.

## Vehicles in Camp

During Check-in and Check-out, limited motor vehicle traffic will be permitted between the parking lot and the campsites. ONE vehicle per site may be used. Drivers shuttling packs and camp equipment to and from the parking lot must respect the One Vehicle Policy, as well as the 5 MPH speed limit on campgrounds. Under no circumstances may a vehicle remain parked at the campsite after the unloading period is finished. Trailers are available from the camp to transport gear in lieu of a unit vehicle.

## Maintenance

The camp can provide your unit with some types of equipment other than tents and platforms. Any additional items you need can be checked-out at the maintenance building. The unit is responsible for the return of all items. *Refer any repairs necessary to site facilities to headquarters.* Please help us keep the camp in good shape by reporting repairs needed promptly. Trash containers in the campsite should be emptied regularly; the bags deposited at the gateway to your site. All bags must be securely closed. Maintenance will do a trash run daily.

## Camp Leadership

It is the responsibility of the troop committee to provide the best possible leadership for this important activity. All units in camp must be under the leadership of at least two adults (one must be 21 or older and registered with BSA) at all times. Leaders may rotate if necessary, but at least two leaders must be with the unit 24 hours a day. The second leader must be 18 years of age or older. The majority of discipline and organization of your troop is your responsibility. To augment your annual program, the camp staff will work with you. It is never the staff's task to take over your role as leader of your unit, but to aid you in achieving the utmost respect of your Scouts. The camp staff will work as your advisers and helpers, and will provide an

environment in which your boys can grow into a better-organized, better-prepared and more independent organization with better-trained boys and leaders.

## **Hazing & Initiations**

Hazing is defined as harassing by exacting unnecessary or disagreeable work or being subject to harsh banter, ridicule or criticism. Troop leadership should be especially vigilant that no hazing or initiations are practiced at camp.

## **Swim Check**

Each Scout will be issued a “buddy tag” at the medical inspection station upon arriving at camp unless such activity is restricted by doctor’s orders. Each camper will be required to take a swimming test upon arrival to determine his or her swimming ability and classification. Aquatics facilities are for the use of registered campers only. Scouts unable to swim are encouraged to enroll in the “non swimmer instruction.” All campers, including leaders who plan to use the pool, must be tested. Leaders must use the buddy system as well as the Scouts.

### **Non-swimmer (white)**

No test - sign up for swimming lessons

### **Beginner (red-white)**

Jump feet first into water over your head, level off, and swim 25 feet; make a sharp turn and return to the starting point.

### **Swimmer (red-white-blue)**

Jump feet first into water over your head, level off, and swim 75 yards using any strong stroke on your stomach or side, swim 25 yards using a resting backstroke; rest by floating.

## **Inspections**

The Clean Camp Award will be presented to each unit at the end of the week. Those units that have maintained a 90 percent average to their daily inspections will receive this award. Upon arrival in camp, a daily inspection sheet will be handed out to each troop. The Program Director, Commissioner, or their designee will inspect your campsite between 9am and Noon every day up to, and including, check-out day

## **Emergency Drill**

An emergency drill is conducted within 24 hours upon arrival at camp. Done the first full day of camp, after lunch, during siesta. Scouts sound report directly to site after lunch. Trading Post is closed. Runners will come to site. Drill is over when “all clear” is given.

## **Adult Leader Training**

Basic Leader Training – CCCBSA will sponsor adult leader training in both camps this summer. Please look for a flyer in your mailbox when you check into camp for details of locations of the training sessions for your week.

There is no fee for summer camp training courses. Training Certificates will be issued for those who complete the course.

## **The Following Training Courses will be offered:**

New Leader Essentials	Tues. 10 - Noon
Scoutmaster Specific (Session I)	Tues. 2 – 5
Scoutmaster Specific (Session II)	Wed. 10 – Noon
Scoutmaster Specific (Session III)	Wed. 2 - 5

# Your Stay at Camp Ware

## Program

A complete schedule can be found following this section. The majority of your troop's days in camp will be spent as follows:

**Polar Bear** 7:00 -7:30 AM  
**Troop Roll Call** 7:45

Troops are issued a flag that should be raised and lowered with the proper observances. Each unit should conduct roll call, and any unaccountable absences should be reported to headquarters immediately.

**Breakfast** 8:00

**Morning Activities** 9:00 – 9:50

This time is open for troops to plan unit activities.

**Merit Badges** 10:00 – 10:50

**Merit Badges** 11:00 – 11:50

**Troop Roll Call** 12:00 PM

**SPL Meeting** 12:15

Senior Patrol Leaders from each troop should report to headquarters for an informal meeting with the Program Director regarding the day's activities.

**Lunch** 12:30

**Siesta** 1:00 – 1:50

This time is set aside for quiet activities in the campsite. All program areas closed at this time. Trading Post will be open during this time also. Campers are expected to be in their sites.

**Merit Badges** 2:00 – 2:50

**Merit Badges** 3:00 – 3:50

**Experienced Scout Program** 2:00—4:00



**SIP / Free Swim** 4:00 – 5:00

Scouts may participate in these informal programs on interest only. (To participate in the Pool's SIP, a Scout must be a Red/White/Blue swimmer)

**Troop Roll Call** 5:30

**Retreat** 5:45

Every evening, units gather on the parade field for our camp-wide retreat ceremony. All Scouts and leaders must be in Class A uniform.

**Dinner** 6:00 – 6:30

**Evening Activities** 7:00 – 8:00

This time is for pre-arranged Troop activities at various program areas.

**Camp Wide Event** 8:30

On nights with a camp-wide activity, all troops should meet at Headquarters at the designated time.

**Taps** 11:00 PM

All Scouts must be in their sites at 10:00 PM, and they shall remain there until 7:00 AM. Exceptions to this are programs that extend past taps and before reveille, such as Astronomy, Camping and Wilderness Survival outposts. If for some reason, a troop has an activity planned that goes past these times, the camp director must be informed. Please conduct yourselves in a manner that will not disturb other troops in camp.

## Your Week Schedule

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
7:00		Polar Bear					
8:00		Breakfast	Outpost	Breakfast			
9:00		Inst. Swim	Inst. Swim	Inst. Swim	Inst. Swim	Mile Swim /Rifle Range	
10:00		Merit Badge	Merit Badge	Merit Badge	Merit Badge	Merit Badge	
11:00		Classes	Classes	Classes	Classes	Classes	<b>Check-Out</b>
12:00		SPI Meeting					
12:30		Lunch	outpost	Lunch			
1:00		Siesta					
2:00	<b>Check- In</b>	Merit Badge	Merit Badge	Merit Badge	Merit Badge	Merit Badge	
3:00	Swim Checks	Classes	Classes	Classes	Classes	Classes	
4:00		SIP/Free Swim					
5:00						Parents	
5:45	Retreat			Retreat			
6:00	Dinner		Outpost	Dinner			
7:00	1st year					Inter-Troop	
8:00	Orientation		Troop Night				
8:30	Open	Camp-wide		Camp-wide	Water	Closing	
9:00	Campfire	Game		Game	Carnival	Campfire	
10:00			Leaders Cracker				
11:00		<b>Lights Out</b>		<b>E-Prep.</b>	<b>Campcraft</b>	<b>Lights Out</b>	

# Merit Badge Classes

See the Forms section toward the end of this section for a complete class schedule.

## Aquatics

### **Canoeing: (Horseshoe)**

Must be R/W/B swimmer. Classes held at the boat docks on the Octoraro. 2-Hour Class.

### **Rowing (Horseshoe)**

Must be R/W/B swimmer. Classes held at the boat docks on the Octoraro. 2-Hour Class.

### **Swimming**

Must be R/W/B swimmer. Two classes offered. Two class sessions.

### **Lifesaving**

Must be R/W/B swimmer. Must have the swimming merit badge prior to arriving at camp. Two class sessions.

### **BSA Lifeguard:**

Must be 14 years old. R/W/B swimmer.

## Campcraft

### **Pioneering**

Must be a First Class Scout prior to arriving at camp. Two class sessions.

### **Cooking**

Must be a First Class Scout prior to arriving at camp. Scouts will be cooking five meals during the week.

## **New Experienced Scout Program**

### **Orienteering/Backpacking**

BP 11a, 10 (two treks)

### **Wilderness Survival**

Scouts will participate in an outpost that will leave Thursday night and return Friday morning. Scouts must provide backpacks.

### **Camping**

Pre-requirements: 8, a-c. Scouts will participate in an outpost that will leave Thursday night and return Friday morning. Scouts must supply tents and backpack. Two classes offered.

## Nature

### **Environmental Science**

Recommended for Scouts First Class and above. Two classes offered, two sessions each. Class requires one half hour of observation daily.

### **Astronomy**

Pre-requirements: 5b & 6

Scouts will participate in three astronomy hikes, weather permitting.

### **Nature**

Pre-requirements: 4a 2 & 5

### **Mammal Study**

Pre-requirements: 3 & 4

### **Reptile and Amphibian Study**

Pre-requirements: 8

### **Weather**

Pre-requirements: 8

### **Fish and Wildlife Management**

### **Soil and Water Conservation**

### **Forestry**

Pre-requirements: 5a or 5b & 7b or 7c

## **Handicraft**

### **Basketry**

There is a \$14.00 class fee, pay at the trading post before class.

### **Leatherwork**

There is a \$14.00 class fee, pay at the trading post before class.

### **Woodcarving**

There is a \$6.50 class fee, pay at the trading post before class.

### **Art**

### **Indian Lore**

There is a \$6.50 class fee, pay at the trading post before class.

## **Shooting Sports**

### **Archery**

No Charge, Recommended for experienced Scouts first class and above.

### **Rifle Shooting**

There is a, \$6.50 program fee. Recommended for experienced Scouts first class and above.

Troops may schedule a troop shoot at no additional cost.

### **Shotgun Shooting**

There is a, \$19.00 program fee.

Recommended for experienced Scouts first class and above.



## **Health & Fitness**

### **First Aid**

Pre-requirement. 1 & 2b

### **Personal Fitness**

Pre-requirements 7, 8 & 9

### **Emergency Preparedness**

Pre-requirements: 1, 6c & 8c

Must have First Aid merit badge prior to arriving at camp. Scouts will be participating in a night exercise during the week.

## **Other**

### **Trailblazers**

(For Scouts who have NOT completed Tenderfoot, Second Class, or First Class Rank requirements)

The Trailblazer program will only involve those Scouts who are brand new to Scouting. We will place your new Scouts in patrols lead by boys their own age. Each one will get a chance to be a patrol leader during the week. They will participate in learning various Scouting skills and other events each morning and have time to earn elective merit badges in the afternoon. The Scouts will have the opportunity to learn basic skills of Scouting in hands-on situations. We recommend that first year campers look at taking some of the recommended merit badges after lunch, as well as working on handicraft merit badges. Scouts will camp overnight on Thursday. please help them plan accordingly (they will need a backpack). The Trailblazer program runs from 10:00 AM to 12:00 Noon Monday through Friday.

#### **Purpose:**

To provide a structured, basic skill, summer camp program to fulfill the needs of the first year camper - especially those who are just beginning in Scouting.

#### **Objectives:**

1. To teach basic skills
2. To teach patrol method through application
3. To work on selected requirements and teach the Boy Scout advancement program
4. To make learning and advancement fun
5. To increase the tenure in Boy Scouts troops.

#### **Needs of the First Year Camper that this Program will address:**

1. Teach the patrol method by doing and learning together
2. Develop Scout skills through effective teaching and testing
3. Build confidence through achievement
4. Structured time to make effective use of time while at camp
5. Teach the Scout Oath and Law through quality staff and program.

### **Special Interest Programs**

Life Guarding – Scouts will learn advanced life guarding and swimming techniques, as well as many of the behind the scenes skills required to keep the most popular program areas at camp running clean and algae free.

Shooting Sports – Advanced safety skills and shooting sports techniques will be developed as part of the Shooting Sports SIP, fun shoots, and shooting competitions.

Handicraft – The Handicraft SIP offers Scouts a chance to hone their craftsmanship and learn about special craft skills including stained glass, metalworking and leather tooling.

Health and Fitness – The health lodge SIP focuses on honing a Scout's emergency response skills. Scouts will learn about the history of emergency response, participate in a realistic first aid demonstration and learn worst-case scenario techniques for rescue and lifesaving.

Nature – The ecosystem in which we live is one of the most fascinating and important aspects of human life. Scouts in this SIP will go on a River Raid for exotic Octoraran animals, observe snakes and other animals feeding, and hike the Horseshoe Trail.

Campcraft – Scouts who wish to hone their camping and pioneering skills will enjoy this SIP. In addition to advanced woodsman skills, Scouts will also learn decorative knots and timber-making

exercises.

### **COPE and Mountain Biking (Both of these are at Camp Horseshoe)**

COPE - COPE is an acronym for Challenging Outdoor Personal Experience that consists of a rope course of activity and reflection designed to develop skills in leadership, problem solving, communication, trust, decision-making and teamwork. COPE provides the opportunity for individual and team growth as through challenges designed to test skills and character. Highlights of a week at COPE include rappelling from a 35-foot rappelling tower, riding on a 300-foot rip line, and climbing a vertical playground.

COPE meets Monday through Thursday from 3:00 PM to 5:00 PM and on Friday, from 2:00 PM to 5:00 PM. There is a **\$6.00** charge. The minimum age for participation is 14. Scouts completing COPE receive a segment for the Ware patch.

Open Rappelling and Climbing - The rappelling tower will be open from 7:00 PM to 8:00 PM daily for Scouts ages 13 and older to learn and participate in these activities. Participants must wear long pants. At times, the tower may be closed due to weather or unforeseen circumstances.

Mountain Biking - Several Mountain biking trails have been designed to challenge Scouts and adults physically and mentally while building cross-country biking skills. Our experienced Mountain Biking staff offers many rides throughout the week open to all Scouts 14 and older. Adults may ride free of charge if there is room on the guided ride. A segment is awarded, for the Ware patch to those who ride at least 5 times in the morning or 3 of 4 times in the afternoon.

Scouts may bring their own bikes or use bikes provided by camp. Due to safety and environmental concerns, Scouts may not ride bicycles unless being led by one of our Mountain Biking staff members. All other bike riding is prohibited and all bicycles must be registered and stored at the Maintenance building when not in use. **Fees**, use of camp bike **\$3.00**, using own bike **\$2.00**

# Merit Badge Schedule

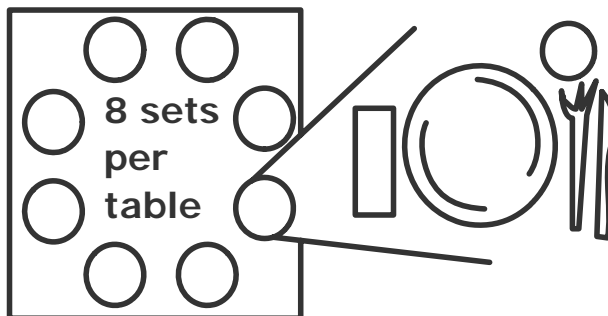
2007 Ware Merit Badge Schedule					
	10:00 AM	11:00:00 AM	2:00 PM	3:00 PM	4:00 PM
<b>Aquatics</b>	Swimming A		Swimming B Canoeing HS		SIP
	Life Saving				
	Rowing				
	Kayaking HS must be 14				
<b>Nature</b>	Envi. Sci. A1 A2		Soil water	Reptile/Mammals	SIP
	Weather	Env. Sci. B1, B2			
	Astronomy	Forestry	Fishing/wildlife	Nature	
<b>Campcraft</b>	Camping A		Cooking	Camping B	SIP
	Pioneering		Wilderness/Survival		
<b>Shooting Sports</b>	Shotgun		Rifle		SIP
			Archery		
<b>Handicraft</b>	Woodcarving	Baskerty A	Leatherwork	Baskerty B	SIP
		Indian Lore		Art	
<b>Other</b>	Emerg. Prep		Per. Fitness B		First Aid B
	First Aid A	Per Fitness A			
	Trailblazer				
	Mountain Biking HS				
			<b>New Older Scout Program</b>		
<b>Note:</b>	Sign up for either A or B must take 2 hour class Shaded gray areas 2 hour classes. White 1 hour class		A1 A2 must take both	SIP - Special Interest Program	

# General Information

## Food Services

### Waiters

Select one Scout per table for your unit (8 campers per table) to serve as the waiter for each meal. Waiter duty should rotate between campers, and each day they should report to the dining hall *20 minutes* before the meal to prepare the tables for the meal. The Dining Hall Steward will guide the waiters in successfully setting the tables, bringing out food, and cleaning up following the meal.



### Part-time Leaders

Part-time leaders may purchase meal tickets from the trading post. Prices for meals are as follows:

- Breakfast: **\$4.50**
- Lunch: **\$5.50**
- Dinner **\$6.50**

### Government Milk Program

The Chester County Council, BSA participates in the special milk program for children at both camps and the council has assured the Pennsylvania Department of Education that all campers in these camps are served milk regardless of race, color, religion, disability, sex, or national origin, and there is no discrimination to the serving of the milk. The Chester County Council, BSA further agrees to the "Fair Hearing Procedure" if there arise any complaints concerning the free milk distribution.

### Health and Safety Issues

- Closed toe shoes must be worn at all times, when traveling around camp: exceptions are not made for the pool and shower house.
- Swimming in the creek is prohibited.
- Every Scout and leader must have a complete health form. **All forms become a permanent camp record and are unavailable for return.** Make copies for your files
- Leaders are encouraged to remind Scouts that daily bathing prevents illness and promotes cleanliness. Pool house showers are marked clearly for Adult Male and Female, Staff, and youth Scouts. No Scouts may use the Adult Showers or vice versa. An adult is anyone over the age of 18.
- Upon arrival at camp, check all medications with the health officer at the health lodge.

### Firearms

- Personal Weapons are not allowed in camp. (Rifles, shotguns, arrows, paint ball guns, BB guns, etc.)

## **Pets and Wildlife**

- Leave all pets at home! Pets of any type are not permitted in camp.
- Scouts should be informed that all wildlife encountered on the Reservation must be left undisturbed. If an animal's presence presents a problem in your campsite, please inform headquarters staff. Please do not attempt to remove or capture any animal or allow any Scouts to do so.

## **Alcohol, Tobacco, and Drugs**

Alcoholic beverages and controlled substances are *not allowed* on camp property. Violators will be asked to leave and the proper authorities will be informed if deemed necessary.

### **BSA Alcohol, Tobacco, and Drugs Policy**

It is the responsibility of the Boy Scouts of America to protect the health and safety of the young people in our program.

*It is the policy of the Boy Scouts of America that leaders should not use tobacco products in any form in the presence of youth members.*

*In addition, extreme care should be exercised to provide smoke-free environments for all Scouting participants.*

*All buildings or facilities under the control of the council are designated non-smoking facilities. Smoking outside entrance/exit or at any location, is not permitted. In addition, all Scouting functions, meetings, or activities are conducted on a smoke free-basis with permitted smoking areas located away from all participants.*

*For smoke areas, contact the camp director or program director.*

## **Campfires**

The danger of fire in camp is very serious. There can be no allowance for carelessness with a danger this great.

- All fires in the sites must be in a fire ring.
- No flames, matches, candles, lanterns, stoves, etc. in tents.
- The fireguard chart provided must be posted, carefully monitored, and signed each day before inspection.
- Fire buckets, barrels and Indian pumps are for fire fighting only and must be topped off each day.
- Propane stoves and lanterns can only be used under close adult supervision.
- No liquid fuels are permitted.
- No fires are to be left unattended by an adult.

## Contacting Home

### Telephones

There is one pay phone in headquarters for the use of Scouts and Scout leaders. A Scout leader must accompany all Scouts from their unit in order to use the phone. Please limit the number and length of calls. Please discourage parents from calling their sons. Remind them that the Scouts are not near the phone so messages will have to be taken and calls returned.

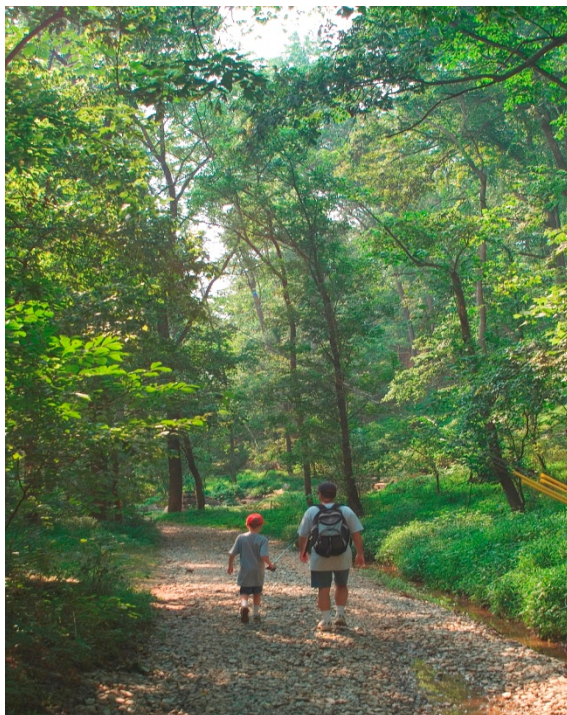
The number at Camp Ware is  
**717-548-2786**

### Letters to Camp

Letters generally take 7 to 10 days to arrive at camp from northern Chester County. Please address letters as follows:

Camp Ware  
Scout's Name & Troop Number  
239 Jubilee Rd.  
Peach Bottom PA, 17563  
-OR-  
camp\_ware@yahoo.com

Each campsite has a mailbox in the HQ building and leaders should check it daily.



## Miscellaneous



### Lost and Found

Finders should bring any items to the headquarters building. Please inquire about lost items at headquarter front desk.



### Trading Post

The camp maintains a well-stocked trading post. Hours may vary, but the trading post is usually open throughout the day and evening except during meal times and camp wide activities. Items such as candy, soft drinks, personal items, and needed program items such as merit badge books and crafts are available. Additionally, the trading post stocks items like compasses, Scout knives, T-shirts, Belts, Buckles, Patches. History tells us that the average Scout spends a minimum of \$50 dollars in the trading post during a Scout week.

#### Trading Post Hours

8:30	-	12:15
1:30	-	5:15
7:00	-	8:00

After Closing Campfire  
During Chicken Dinner

*Note: Store hours are subject to change*

## **Leaving Camp Ware**

### **Leaving Camp Early**

If, for any reason, a leader or a Scout needs to leave camp, a unit leader that is at least 18 years of age MUST sign them out at Headquarters. If, for any reason, a camper will not return that week, please notify Headquarters staff. If a leader or Scout becomes ill, they must be signed out at the health lodge (hour permitting) if it is not possible that night, notify the health lodge or headquarters the next day... No refunds will be given if a leader/Scout is not signed out of camp upon leaving the reservation.

### **Last Day Chicken Dinner**

At the end of the session, we will have our World Famous Chicken finger dinner, to which parents, siblings, and guests are invited. This is a buffet style dinner. *Units must register the number of tickets they will need to reserve for this meal BY Check-in.*

Scouts and Leaders chicken dinners are included in your camp fees; pick up your tickets at checkout. The cost of tickets for a guest is **\$6.50** per person with children under 3 years free of charge.

### **Stake-A-Claim**

Unit leaders wanting to “stake a claim” for the same site for the same period next summer, may do so at check-out. These claims can only be made while your troop is in camp; in council units not staking a claim at camp may make reservations anytime prior to Labor Day on a first come, first serve basis. Out of council units may stake a claim after Labor Day. A \$50.00 reservation fee must accompany the Stake a Claim form. This is a site fee only, not part of Scout or Leader Fees, and is non-refundable.

## **Awards and Recognition**

### **Order of the Arrow**

The Order of the Arrow (OA) is a national honor association and service organization that was founded to recognize those Scouts and leaders who best exemplify the Scout Oath and Law in their daily life. A special flap on their right hand uniform pocket and a sash worn during lodge activities identifies members.

Camp Ware is served by the Octoraro Lodge 22, a thriving group of dedicated Scouts and Scouters who are responsible for maintaining the facilities and traditions of the camp. Eligibility for Scouts is determined with leader approval, rank, and camping tenure. Annual elections are held by troops under the direction of a Lodge official.

Once elected Scouts are “called out” in a solemn ceremony, they then must complete an “ordeal” by which they demonstrate their skills and dedication to Scouting. We hold “call outs” during the closing campfire on Friday night. All OA members are encouraged to wear their sash during Friday retreat.

Units wishing to conduct elections or participate in the “call out” ceremony should contact the designated OA Camp Chief. We cannot conduct elections for out-of-council troops, but they may participate in the “call out” ceremony if a letter from their lodge reporting election results is delivered to the Camp Chief.

Before in council troops leave Saturday morning, please check your mailbox for the candidate’s paperwork; it details the registration for the ordeal work weekend, cost, and what to bring. There will be one set of forms for each candidate “called out” Friday night. If you need additional sets, they are available at the Council Service Center.

## **Silver Buckle**

A silver buckle is awarded to one youth member from each troop, who, in the opinion of his fellow Scouts, has demonstrated the finest example of Scout Spirit and has lived the Scout Oath and Law in his conduct throughout the week. The Scout selected must have been in camp all week, but under the age of 18 and has never received the award before.

## **100% Patrol Award**

A one hundred percent patrol segment is awarded to those patrols that have 100% of their natural patrol in camp all week. The award is a segment for the Ware patch.

## **Standard Patrol Award**

The standard patrol always is awarded to natural patrols of at least four Scouts who satisfactorily complete advancement, participation, and one service requirement.

## **Standard Troop Award**

The standard troop award is an award given to troops with at least two natural patrols or at least 50% of their natural patrols in camp. All patrols must earn the standard patrol award and the troop must qualify by having participated in camp-wide events to the satisfaction of the Program Director. The troop must also earn the clean camp award.

## **Clean Camp Award**

Earned by maintaining clean camp standards. Your site will be inspected on a routine basis

## **Camp Ware Emblem Patch**

A round 3" patch is an award given to all first year campers. A year segment is an award each Scout earns if he has:

- Conducted himself to the Scout Law
- Shown spirit in a sincere effort to advance himself in Scouting
- Accomplished such objectives that troop/patrol leadership sets
- Attended camp the entire time with his troop.

## **Check-out and Pick-up**

Checkout begins at 10am on the day of departure for each group in camp. After breakfast, units will report to their sites, pack their gear, and wait for the final inspection by the camp commissioner or his designee. Also, please make a time to meet with the business manager to complete the financial checkout.

## **Forms and Fees**

- Page 22: Standard Troop Award Application**
- Page 23: Standard Patrol Award Application**
- Page 24: Health and Safety Inspection Report**
- Page 25/26: Daytime Activity Roster**
- Page 27 Camp Ware \$25 per Scout payment.**
- Page 28: Camp Ware Final Transmittal Payment**
- Page 29: Stake-A-Claim 2008**
- Page 29/30: Troop Roster**
- Page 31 Preliminary Accident Report**
- Page 32: Accident and Sickness Insurance**
- Page 33: Class 1 / Class 2 Physical Form**
- Page 36: Class 3 Physical Form**
- Page 38: Driving Directions to Camp Ware**
- Page 39: Boy Scout Resident Camp Refund Policy**



## Standard Troop Award Application

Troop # \_\_\_\_\_ Council \_\_\_\_\_

Number of Patrols in Camp \_\_\_\_\_

Scoutmaster \_\_\_\_\_

Camp Standard Troop is a high honor based on assessment of three areas:

### Patrols

All Patrols must have earned the Standard Patrol Award.

### Advancement

The Troop must meet its advancement objectives to the satisfaction of the Program Director.

### Activities

The Troop must:

- Participate in all camp wide activities (games, vespers, campfires, and religious observance).
- Conduct at least one Troop campfire program during the week (The program should exhibit Scout spirit and live up to the high ideals of the Scout Oath, Law, Motto, and Slogan).
- Earn the Clean Camp award on 5 of 6 days. All cases of illness must be reported to the Health Lodge immediately. On hikes or trips, trail first aid must always be followed by a check-up upon returning to camp.

**NOTE:** This application is due in addition to the Standard Patrol Applications, Friday before noon.

Adult Leaders:

Troop Leaders (Scouts)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Scoutmaster

Senior Patrol Leader

Due by end of siesta on Friday.



## Standard Patrol Award Application

The \_\_\_\_\_ Patrol of Troop# \_\_\_\_\_

Patrol Leader \_\_\_\_\_

Senior Patrol Leader \_\_\_\_\_

The Standard Patrol Award is an award given to a patrol, having in camp four or more regular members. The camp will present the award to each patrol that meets the following requirements:

The patrol leader must register his patrol at the camp office, Monday morning from 9 to noon and re-submit.

The patrol must keep a log of patrol activities during the week; it should be on 8-1/2 x 11 sheets of paper in a diary form and not just timetable. The senior patrol leader and the Scoutmaster must check the log on Wednesday during rest period for a preliminary review and at rest period on Friday for the final check.

As a patrol, do a distinctive service for Camp Ware as approved by the Program Director. A preliminary check will be made Wednesday. The project must be completed by Friday, 4:00 P.M. for final approval. Project: \_\_\_\_\_

As a patrol, prepare and serve on or off your troop site, the following meals:  
Breakfast (\_\_\_\_\_) Lunch (\_\_\_\_\_) Dinner (\_\_\_\_\_)

Cooperate with other patrols of the Troop in planning and conducting at least one troop campfire program. In the log, details must be included of the part the patrol was responsible for and successfully completed.

The patrol must plan and carry out an effective patrol schedule utilizing the opportunities of the troop scheduled activity and Scout craft areas to the patrols best advantage.

The troop leader must approve and sign this form, as evidence that the patrol has participated in the whole troop program to his satisfaction and that the objectives have been met.

This patrol has qualified for the Standard Patrol Award in all requirements listed above, and as evidenced by our signatures.

SUBMITTED BY: \_\_\_\_\_  
Patrol Leader

RECOMMENDED BY: \_\_\_\_\_  
Troop Leader

Due by end of siesta on Friday.



## Health and Safety Inspection Report

Troop \_\_\_\_\_ Leader: \_\_\_\_\_

Every day an inspector assigned by the commissioner will check your site for organization, general conditions, and cleanliness, as described in the "Health and Safety Guide" you received with this form. A Clean Camp Award flag is an award given to those sites scoring at least 20 points on their daily inspection.

Those units who earn a clean camp rating for five of the six inspection days will receive the clean camp flag. Awards will be presented at the end of the week to those units that score the highest total points on their daily ratings.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Inspector's Initials						
Shelter open and Clean; free from damage						
Personal & Troop equipment neat and orderly						
Bunks made, Bedding airing						
Trails and Grounds Clean; no damage to trees, etc.						
Latrine clean and swept						
Washstand clean and swept						
Fireguard chart posted, signed and plan followed						
Daily rating						

U = Unacceptable 1 = Poor 2 = Fair 3 = Acceptable 4 = Good 5 = Excellent





**CAMP WARE – \$25 per Camper Fee**

**CHESTER COUNTY COUNCIL**

**BOY SCOUTS OF AMERICA**



**2007**

- **Note the Leaders pay Deposit this year.**

**\$25.00 Camper Commitment Fee Transmittal Due by March 31**

TO: Council Service Center DATE: \_\_\_\_\_

FROM: Troop \_\_\_\_\_ District \_\_\_\_\_ Council \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

This is to confirm our Troop's summer camp reservation at **CAMP WARE** for the

WEEK OF \_\_\_\_\_ IN CAMPSITE \_\_\_\_\_

We plan to have \_\_\_\_\_ SCOUTS and \_\_\_\_\_ LEADERS attend camp this summer.

Our check for \$ \_\_\_\_\_ is enclosed for **\$25.00** per Camper registration fees.

Make checks payable to **CHESTER COUNTY COUNCIL**.

**This \$25.00 commitment fee is non-refundable if you fail to attend your week.**

**REMINDER:** To have exclusive use of a Troop site, a **\$25.00** commitment fee per camper must be received by March 31. If the number confirmed is not greater than the stated minimum for the site, units may be asked to share the site or **BE MOVED TO A DIFFERENT SITE**.

**Failure to submit these fees could result in the forfeit of your site and deposit.**

Payment type:

Check /Visa/Mastercard/American express \_\_\_\_\_  
(circle one) (card number) Exp.date

Signature \_\_\_\_\_

Please send one copy of transmittal along with payment to:  
Chester County Council, BSA  
504 South Concord Road  
West Chester, PA 19382

Keep copy for your files and send one to council.

CAMP JOHN H. WARE 3<sup>rd</sup>

CHESTER COUNTY COUNCIL  
504 S Concord Rd

BOY SCOUTS OF AMERICA  
West Chester, PA 19382

2007

FINAL FEE PAYMENT TRANSMITTAL

To make proper arrangements for your experience at camp, we must have a camper count prior to your arrival at camp. **THIS TRANSMITTAL IS DUE JUNE 1**

All troops paying their fees after due date and AT CAMP will be charged the full fee of \$255.00.

TROOP \_\_\_\_\_ CAMPSITE \_\_\_\_\_ AT WARE \_\_\_\_\_

ARRIVAL DATE \_\_\_\_\_ WE WILL HAVE \_\_\_\_\_ SCOUTS AND \_\_\_\_\_ LEADERS.  
FEES.

1. \_\_\_\_\_ Scouts X **discounted** camp fee (Paid by Due Date):  
\$240.00 – CAMP WARE = \_\_\_\_\_

2. \_\_\_\_\_ Scouts X **full** camp fee (After Due Date)  
\$255.00 CAMP WARE = \_\_\_\_\_

3. \_\_\_\_\_ Leaders X **discounted** Fees \$120.00 = \_\_\_\_\_

4. \_\_\_\_\_ Leaders X **full** fee \$135.00 = \_\_\_\_\_

5. **TOTAL CAMP FEES (1 + 2 + 3 + 4)** = \_\_\_\_\_

**CREDITS:**

6. \_\_\_\_\_ Campers X \$25.00 per Fee = \_\_\_\_\_

7. \_\_\_\_\_ Other credits (specify) = \_\_\_\_\_

8. **TOTAL CREDIT FEES (6 + 7)** = \_\_\_\_\_

**BALANCE DUE OR OVER PAYMENT (5 minus 8)** = \_\_\_\_\_

INFORMATION

**\$50.00 STAKE-A-CLAIM IS NOT PART OF THE FEES IT IS A SITE FEE ONLY (NON-REFUNDABLE)**

-All part-time overnight leaders pay pro-rated fees.

-All Par- time day leaders pay daily meal fee.

**-Discounted fees apply only if paid in full by June 1**

SUBMITTED BY: \_\_\_\_\_ POSITION \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_

DATE: \_\_\_\_\_ E-MAIL \_\_\_\_\_

Address \_\_\_\_\_

Street

City

State

zip

**John H. Ware 3rd**  
**Summer Camp Stake-A-Claim 2007**

Troop \_\_\_\_\_ of the \_\_\_\_\_ District, hereby Stake-A-Claim for Summer Camp 2008 at \_\_\_\_\_ Campsite, Period# \_\_\_\_\_ Date \_\_\_\_\_ to \_\_\_\_\_ 2008.

- We agree to fill or be responsible for the minimum capacity of the above campsite, which are \_\_\_\_\_ boy campers.
- We cannot fill the minimum capacity for the above campsite. We would have approximately \_\_\_\_\_ boy campers and would share the site with another troop.
- Attached is our \$50.00 reservation fee. Receipt # \_\_\_\_\_ Dated \_\_\_\_\_.

Adult's Name: \_\_\_\_\_  
(Print) (Signature)

Position: \_\_\_\_\_

Address: \_\_\_\_\_  
(street) (city) (st) (zip)

Date: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Email \_\_\_\_\_ (can we read this)

STAKE-A-CLAIM is limited to the same site, same period, and can only be made during the week your Troop is in Camp in 2007. THE STAKE-A-CLAIM IS NOT PART OF THE FEES - IT IS FOR STAKE-A-CLAIM ON A SITE ONLY AND NON-REFUNDABLE (payable each year for a site)

Out-Of-Council Troops may apply \$50.00 to hold the site they are now in for the next season but if a Chester County Council Troop requests the site prior to the last Monday in September, the Out-Of-Council Troop will not have the site confirmed. (At that time, the \$50.00 fee could be applied to another site, or refunded)

Failure to fill minimum site capacity could result in your unit sharing the site or being asked to move to another site. This is at the discursion of the camp director.

Payment:

Visa/Master Card/ American Express (circle one) check

\_\_\_\_\_  
Card # Exp. Date

Signature \_\_\_\_\_

Chester County Council BSA  
504 S Concord Rd  
West Chester PA 19382  
610-696-6621 ext. 25

# Troop Roster

All Names on Roster will be charged the camping fee

Today's Date \_\_\_\_\_

	Scout's Name	Phone Number	Patrol	Age
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				

Scout's Name	Phone Number	Patrol	Age
31			
32			
33			
34			
35			
36			
37			
38			
39			
40			
41			
42			
43			
Leader's Name	Phone Number	Position	+21*
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			

\* -- Check if a leader is at least 21 years of age.



## Accident and Sickness Insurance

All registered members and leaders in the Chester County Council, BSA are covered under an accident and sickness umbrella policy.

Keep this nearby for use if you use medical services during a Scouting activity. To eliminate confusion about accident and sickness insurance, we offer the following to help effectively process claims.

ACE, American Insurance Company, HSR Health Special Risk, Inc. Umbrella policy is the insurance for which all Scouts and Scouters are assessed \$1.00 per year at rechartering time.

If someone in your unit has an incident where it becomes necessary to seek medical services, the procedure you should follow is quite simple and will help to speed up processing of claims to hospitals and doctors.

**For incidents occurring during an official Scouting activity, the following procedure should be followed:**

- Fill out the accident report fully and where possible have health service provider fill out the bottom portion and sign, then submit a copy to your Scoutmaster and Chester County Council 504 S Concord Rd. West Chester PA 19382.
- Initial billing should be sent to: your insurance company as the primary holder**
- Give the health service provider the name of our insurer carrier as the secondary holder and policy number: PTPN00327402 HSR 6/1 – 6/1, Current year.

If you take the accident report to the hospital with you have them make a copy for their records and you send the original into the Council

### **Following the procedure will set in motion the following:**

Provide the Health Service Provider with your Insurance Co. as Primary Holder

Leaders

Fill out claim report and submit to address below:

Health Special Risk, Inc  
HSR Plaza  
4001 N. Jersey Ln.  
Carrollton, TX 75007-1520

- **Coverage includes:**
- Accident Medical Benefits \$15,000**
- Dental Injury Benefits \$5,000**
- Ambulance Service Benefits \$6,000**
- Specified Injury Benefit \$35,000**
- Sickness medical benefit \$7,500**
- Non duplication Amount \$300.00**

If you have any questions on coverage or procedures call Maureen at 610-696-6621 ext 25

[milmanm@cccbsa.org](mailto:milmanm@cccbsa.org)

# Class 2 Physical



## PERSONAL HEALTH AND MEDICAL RECORD CLASS 1 AND CLASS 2

**Class 1 (update annually for all participants).** Activity: Day camp, overnight hike, or other programs not exceeding 72 hours, with level of activity similar to that of home or school. Medical care is readily available. Current personal health and medical summary (history) is attested by parents to be accurate. This form is filled out by all participants and is on file for easy reference.

**Class 2 (required once every 36 months for all participants under 40 years of age).** Activity: Resident camp or any other activity such as backpacking, tour camping, or recreational sports involving events lasting longer than 72 consecutive hours, with level of activity similar to that at home or school. Medical care is readily available.

**Note:** Some states require an **annual** precamp medical evaluation. Your BSA local council service center can advise you about the requirements for your state.

If your child has had a medical evaluation (**physical examination**) within the last 36 months, a copy of the results of this examination must be attached to the health history for all participants in a camping experience lasting longer than 72 consecutive hours. If a copy is not available, a physical examination (using the Class 2 section of this form) must be scheduled by a \*licensed health-care practitioner. This medical evaluation (physical examination) also is required if your child is currently under medical care, takes a prescribed medication, requires a medically prescribed diet, has had an injury or illness during the past 6 months that limited activity for a week or more, has ever lost consciousness during physical activity, or has suffered a concussion from a head injury.

\*Examinations conducted by licensed health-care practitioners, other than physicians, will be recognized for BSA purposes in those states where such practitioners may perform physical examinations within their legally prescribed scope of practice.

**THIS FORM IS NOT TO BE USED BY ADULTS OVER 40, BY HIGH-ADVENTURE PARTICIPANTS (USE FORM NO. 34412A), OR FOR NATIONAL SCOUT JAMBOREE (USE FORM NSJ-34412-97).**

### CLASS 1 PERSONAL HEALTH AND MEDICAL HISTORY (To be filled out annually by all participants)

To be filled out by parent, guardian, or adult participant. Please print in ink.

#### IDENTIFICATION

Name \_\_\_\_\_ Date of birth \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Name of parent or guardian \_\_\_\_\_ Telephone \_\_\_\_\_

Home address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Telephone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Telephone \_\_\_\_\_

Name of personal physician \_\_\_\_\_ Telephone \_\_\_\_\_

Personal health/accident insurance carrier \_\_\_\_\_ Policy No. \_\_\_\_\_

I give permission for full participation in BSA programs, subject to limitations noted herein.

**In case of emergency,** I understand every effort will be made to contact me (if participant is an adult, my spouse or next of kin). In the event I cannot be reached, I hereby give my permission to the licensed health-care practitioner 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 participant is an adult).

Date \_\_\_\_\_ Signature of parent/guardian or adult \_\_\_\_\_

**Some hospitals require the parent/guardian signature to be notarized. Check with your BSA local council.**

NAME

TROOP

CAMP SITE

Check all items that apply, **past or present**, to your health history. Explain any "Yes" answers.

**ALLERGIES:** Food, medicines, insects, plants Yes  No  Explain: \_\_\_\_\_

<b>GENERAL INFORMATION:</b>	Yes	No	Yes	No	Yes	No
ADHD (Attention-Deficit						
Hyperactivity Disorder	<input type="checkbox"/>	<input type="checkbox"/>	Convulsions/seizures	<input type="checkbox"/>	Hemophilia	<input type="checkbox"/>
Asthma	<input type="checkbox"/>	<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	High blood pressure	<input type="checkbox"/>
Cancer/leukemia	<input type="checkbox"/>	<input type="checkbox"/>	Heart trouble	<input type="checkbox"/>	Kidney disease	<input type="checkbox"/>

Explain: \_\_\_\_\_

Please list ALL medications taken in the 30 days prior to arrival at the Scouting activity where this form is to be used: \_\_\_\_\_

List any medications to be taken at camp: \_\_\_\_\_

List any physical or behavioral conditions that may affect or limit full participation in swimming, backpacking, hiking long distances, or playing strenuous physical games: \_\_\_\_\_

List equipment needed such as wheelchair, braces, glasses, contact lenses, etc.: \_\_\_\_\_

**Immunizations:** (Give date of last inoculation.)

Tetanus toxoid _____	Measles _____	Polio _____
Diphtheria _____	Mumps _____	_____
Pertussis _____	Rubella _____	_____

**CLASS 2 MEDICAL EVALUATION**

(Read additional requirements outlined on front of form.)

Name \_\_\_\_\_ Age \_\_\_\_\_

**NOTE TO LICENSED HEALTH-CARE PRACTITIONERS:** The person being evaluated will be attending one or more weeks of camp that may include sleeping on the ground and participating in strenuous activities such as hiking, boating, and vigorous group games. Please review the health history with the participant for any interim changes. **Explain any "abnormal" evaluations.**

**PHYSICAL EXAMINATION** (To be filled out by a licensed health-care practitioner)

Height \_\_\_\_\_ Weight \_\_\_\_\_ BP \_\_\_\_\_ / \_\_\_\_\_ Pulse \_\_\_\_\_

VISION: Normal \_\_\_\_\_ Glasses \_\_\_\_\_ Contacts \_\_\_\_\_

HEARING: Normal \_\_\_\_\_ Abnormal \_\_\_\_\_ Explain \_\_\_\_\_

<b>Check box:</b>	N	Abn	N	Abn	N	Abn
Growth development	<input type="checkbox"/>	<input type="checkbox"/>	Teeth	<input type="checkbox"/>	<input type="checkbox"/>	Genitalia
Skin	<input type="checkbox"/>	<input type="checkbox"/>	Cardiopulmonary system	<input type="checkbox"/>	<input type="checkbox"/>	Musculoskeletal
HEENT	<input type="checkbox"/>	<input type="checkbox"/>	Hernia	<input type="checkbox"/>	<input type="checkbox"/>	Neurobehavioral

Explain: \_\_\_\_\_

**Limitations**

Activity restrictions \_\_\_\_\_

Diet restrictions \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Licensed health-care practitioner

Address \_\_\_\_\_ Phone \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**\*Examinations conducted by licensed health-care practitioners, other than physicians, will be recognized for BSA purposes in those states where such practitioners may perform physical examinations within their legally prescribed scope of practice.**

<b>INTERVAL RECORD</b>	<b>SCREENING EXAMINATION</b>	
Date, Time, Place, Etc.	(Findings, diagnoses, treatment, instructions, disposition, etc.)	By
#34414A	PHOTOCOPYING THIS FORM IS PERMITTED.	



34414A  
2000 Printing

NAME

TROOP

CAMP SITE

# Class 3 Physical

PERSONAL HEALTH AND MEDICAL RECORD FORM—Class 3		BOY SCOUTS OF AMERICA		PLEASE TYPE OR PRINT.
<b>I. IDENTIFICATION</b> Age _____ Sex _____ Date of Birth* _____ Name _____ Last name First name Initial Address _____ City & State _____ Zip _____ Health/Accident insurance _____ Policy no. _____		All Class 3 activities require a health examination within the past 12 months by a licensed health-care practitioner.* This includes youth and adult members participating in high-adventure activities, athletic competition, and world jamborees. Annually, this form is to be used by adults over 40 for all activities requiring a physical examination and applies to all Wood Badge participants/staff regardless of age.		NAME _____ UNIT _____ NOTE: Keep original form for your personal record. Make reproductions for agency use. Be sure information and signatures are legible on reproduced copies. This upper section may be reproduced and carried with you for emergency identification and care.
<b>IN AN EMERGENCY NOTIFY:</b> Name _____ Relationship _____ Address _____ Home phone _____ City & State _____ Business phone _____ Personal phone _____ Physician _____ Phone _____		<b>II. EMERGENCY MEDICAL INFORMATION</b> Has or is subject to (check and give details): <input type="checkbox"/> Allergy to a medicine, food, plant, animal, or insect toxin <input type="checkbox"/> Any condition that may require special care, medication, or diet <input type="checkbox"/> ADHD (Attention Deficit Hyperactive Disorder) <input type="checkbox"/> Asthma <input type="checkbox"/> Convulsions <input type="checkbox"/> Heart trouble <input type="checkbox"/> Contact lenses <input type="checkbox"/> Diabetest <input type="checkbox"/> Fainting spells <input type="checkbox"/> Bleeding disorders <input type="checkbox"/> Dentures		
<b>III. PARENTAL STATEMENT</b> Has it ever been necessary to restrict applicant's activities for medical reasons? <input type="checkbox"/> No <input type="checkbox"/> Yes Does applicant take medicine regularly or have special care? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, explain. _____ To the best of my knowledge, the information in sections I, II, III, IV, and VI is accurate and complete. I request a licensed health-care practitioner to examine applicant, to give needed immunization, and to furnish requested information to other agencies as needed. I give my permission for full participation in BSA programs, subject to limitations noted herein. In the event of illness or accident in the course of such activity, I request that measures be instituted without delay as judgment of medical personnel dictates. Parent or guardian _____ (Must sign if applicant is 18 or younger) Applicant's signature _____ Date signed _____		<b>IV. IMMUNIZATIONS</b> If disease, put "D" and year. Last year given _____ Tetanus _____ Diphtheria _____ Pertussis _____ Measles _____ Mumps _____ Rubella _____ Polio _____ Chicken Pox _____ Religious preference _____		
		<b>V. LICENSED HEALTH-CARE PRACTITIONER'S EVALUATION AND ADVICE</b> Approved for participation in: <input type="checkbox"/> Hiking and camping <input type="checkbox"/> Water activities <input type="checkbox"/> Competitive sports <input type="checkbox"/> All activities Specify exceptions _____ Recommendations (explain any restrictions OR limitations): _____ _____ Signed _____ Date _____ *Licensed health-care practitioner *Examinations conducted by licensed health-care practitioners other than physicians will be recognized for BSA purposes in those states where such practitioners may perform physical examinations within their legally prescribed scope of practice.		

**VI. MEDICAL HISTORY**  
 Parent (or applicant if 18 or older): Fill in sections I, II, III, IV, and VI before seeing a licensed health-care practitioner. Check immunizations to be given at this time. Be sure to include any emergency information and restrictions or special care that should be observed. Especially be sure to record any injuries, illnesses, surgery, or significant changes in condition of health of applicant since last complete examination.

- Date of most recent complete physical examination (month and year) \_\_\_\_\_ 19 \_\_\_\_\_
- Are you aware of any current health problems?  No  Yes
- Now under medical care or taking medicines?  No  Yes
- Has there been any surgery, injury, illness, allergy, or change in health status since last complete physical examination?  No  Yes

Give dates and full details below for any "yes" answers.

**IS THERE DISEASE OF (OR PAST OR PRESENT) HISTORY OF:**

	No	Yes	Year	Details
Serious illness	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Serious injury	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Deformity	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Surgery	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Skin, glands	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Ears, eyes	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Nose, sinus	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Teeth, tonsils	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Dentures	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Bridge	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Chest, lungs	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Heart	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Murmur	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Rheumatic fever	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Stomach, bowels	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Appendicitis	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Kidneys or urine	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Albumin	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Sugar	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Infection	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Bed-wetting	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Menstrual problems	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Hernia (rupture)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Back, limbs, joints	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Sleepwalking	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Nervous condition	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Other (explain)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

**VII. HEALTH EXAMINATION**  
 Licensed Health-Care Practitioner: \_\_\_\_\_

The applicant will be participating in a strenuous activity that will include one or more of the following conditions: athletic competition, adventure challenge or wilderness expedition (aboot or afloat) that may include high altitude, extreme weather conditions, cold water, exposure, fatigue, and/or remote conditions where readily available medical care cannot be assured.

- Please insist applicant furnish complete medical history (VI) before exam.
- Review immunizations; for youth (18 or younger) tetanus and diphtheria toxoids, measles, mumps, and rubella vaccines, and trivalent oral polio vaccine are required; youths and adults must have had tetanus booster within 10 years. A measles booster is recommended at age 12.
- After completing section VII, summarize any restrictions and/or recommendations in sections II and V, above, and sign.

Date \_\_\_\_\_ VISION: \_\_\_\_\_ HEARING: \_\_\_\_\_  
 Normal \_\_\_\_\_ Normal \_\_\_\_\_  
 Ht. \_\_\_\_\_ Wt. \_\_\_\_\_ Glasses \_\_\_\_\_ Abnormal \_\_\_\_\_  
 B.P. \_\_\_\_\_ / \_\_\_\_\_ Pulse \_\_\_\_\_ Contacts \_\_\_\_\_

Check box if normal; circle if abnormal and give details below:

<input type="checkbox"/> Growth, development	<input type="checkbox"/> Teeth, tonsils	<input type="checkbox"/> Genitourinary
<input type="checkbox"/> Skin, glands, hair	<input type="checkbox"/> Respiratory	<input type="checkbox"/> Skeletomuscular
<input type="checkbox"/> Head, neck, thyroid	<input type="checkbox"/> Cardiovascular	<input type="checkbox"/> Neuropsychiatric
<input type="checkbox"/> Eyes, ears, nose	<input type="checkbox"/> Abdomen, hernia, rings	<input type="checkbox"/> Other (specify)

COMMENTS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

LABORATORY: Urinalysis (Dip stick) Albumin \_\_\_\_\_ Sugar \_\_\_\_\_

**FOR THOSE ATTENDING PHILMONT OR NATIONAL HIGH-ADVENTURE BASES:**  
 \* The minimum age for all participants is 13 by January 1 of the year of participation. No exceptions.  
 † Trail food is by necessity a high-carbohydrate, high-calorie diet. It is high in wheat, milk products, sugar, corn syrup, and artificial coloring/flavoring. Dinner meals contain meat. If these food products cause a problem in your diet, you need to bring appropriate substitutions with you and so advise base personnel.  
 Note: Licensed health-care practitioners representing high-adventure bases reserve the right to deny access to the trails or other program activity on the basis of a medical evaluation performed at the base after arrival.

REVIEW FOR CAMP OR SPECIAL ACTIVITY						
DATE	AGENCY AND ACTIVITY	BY	"OK"	PHYSICIAN RECHECK NEEDED	RESULTS OF RECHECK	INITIAL

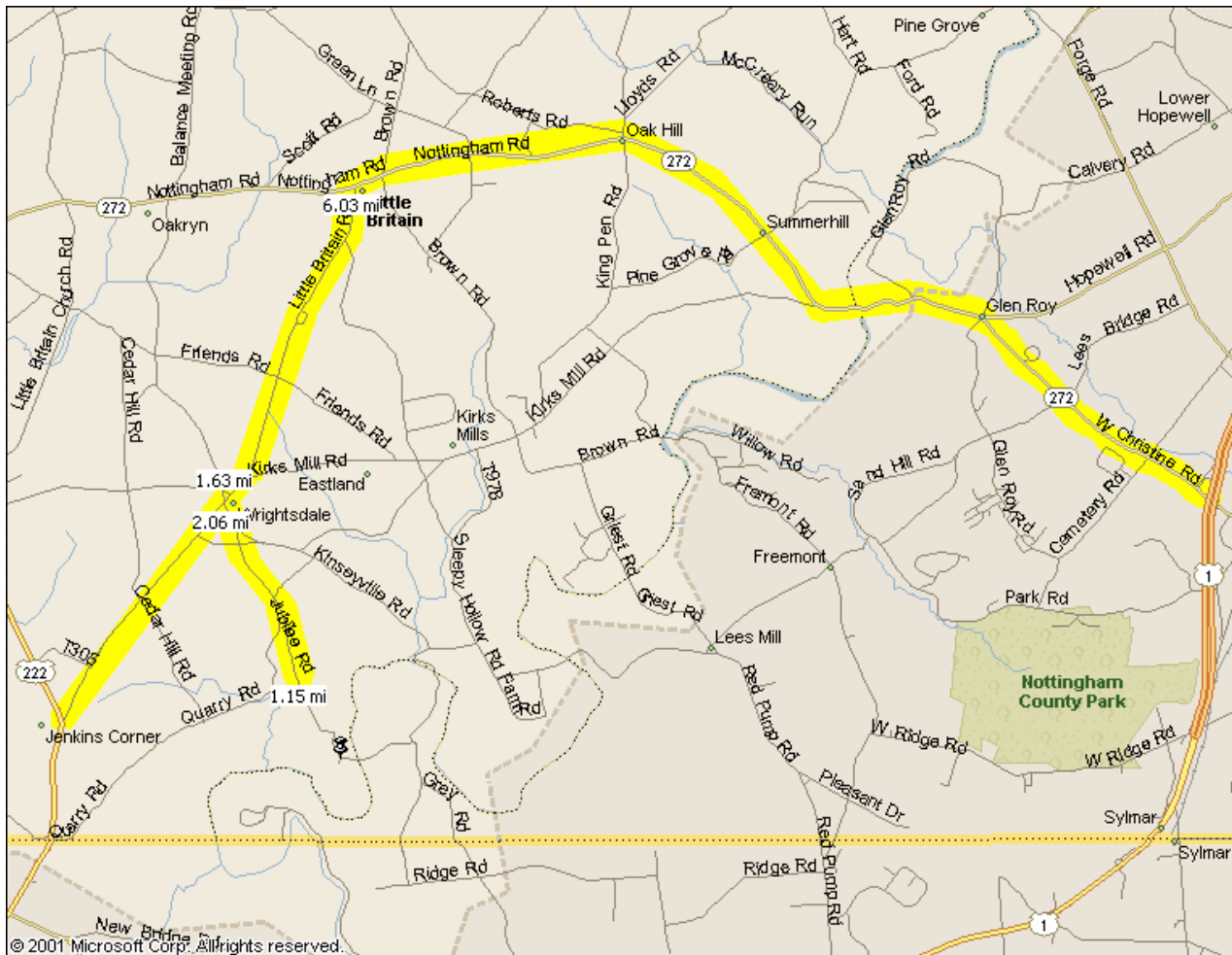
**INTERVAL RECORD** (CAMP, CAMPOREE, TOURNAMENT, TRAVEL, ETC.)

DATE, TIME, PLACE, ETC.	FINDINGS, DIAGNOSES, TREATMENT, INSTRUCTIONS, DISPOSITION, ETC.	BY:



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# Directions To Camp



Note: Octoraro and Grey Roads do not exist today as shown on the map above.

From West Chester: 1 hour | From Pottstown: 1 hr, 20 mins. | From Honey Brook: 1 hour

## From Route 1:

Exit off Route 1 and head North on *Route 272* for about 6 miles.  
 Make a left onto *Little Britain Road*. Continue down *Little Britain Road* for about 1.6 miles.  
 Make a Left onto *Jubilee Road*. Follow *Jubilee Road* all the way into camp.(alternate route) Rt. 1 South, exit ramp 272 North (right) follow to Kirks Mill Rd, make a left follow till ends, make a left onto Little Britain Rd, make your next left onto Jubilee Rd, at the Y in road bear R follow to camp sign.

Follow *Quarry Road* for roughly 2.25 miles. *Jubilee Road* will be on the right. This will be a sharp; "double back" right turn. Careful not to miss this turn.

## From Route 222:

Turn onto *Little Britain Road*. Going North 222, *Little Britain Road* will be on the right. Going South 222, *Little Britain Road* will be on the left; a sharp left turn will be made. Continue up *Little Britain Road* for about 2 miles. Turn right onto *Jubilee Road* and follow it all the way into camp.

## Alternate Route 222:

Turn onto *Quarry Road*. This is a left turn when traveling South 222, and a right turn when traveling North 222.

**Boy Scout Resident Camp Refund Policy**

The \$50.00 Stake-A-Claim fee is non-refundable

The Chester County Council has to make financial expenditures for supplies, staff, etc., months prior to the camp season therefore, all campers are required to pay a \$25.00 commitment fee by the March 31 deadline. This per-camper fee is non-refundable, but may be applied to an additional camper from the same unit, as long as the total number of youth scheduled to attend on your final transmittal form does not decrease

**Note:** Your final transmittal form and unit roster must contain the same number of Scout's.

If the Scout commitment fee **is not made by the deadline date of March 31**, the unit will lose their site. It will be opened for re-sale.

The Council reserves the right to cancel the reservation **if final payment is not received in full by the payment schedule date, June 1**. The units will then lose their \$25.00 per camper fee, which is non-refundable. The Council also reserves the right to adjust campsites or to add another unit to the campsite if the number of campers confirmed on the final transmittal form does not meet campsite capacity.

All fees become non-refundable after the full payment deadlines.

**There will be a charge of no less than \$50.00 Scout/leader, plus your \$25.00 per camper fee for any cancellation/refund- No Exceptions!**

Individual fees, however, may be refunded at the discretion of the Chester County Council Camping Department in the following cases:

Camper/family emergency – serious illness, death or out of the area relocation;

Required summer school during the camp season.

•**Note: Changing your mind does not constitute a reason for a refund.**

To be considered for a refund, please provide the following information **In Writing:**

Troop/Crew number (Scout/leader's name)

Council name and address

Name of Camp attended

Camp week/site

Reason for Refund

Refund request must be received at the Council Service Center in West Chester, PA no later than August 31<sup>st</sup>. No refund request will be considered if received after this date. Refunds will be made **payable to the unit only**.

It is the responsibility of the unit leadership to read, understand and abide by the Council Camping Department's Boy Scout Resident Camp Refund Policy.

Chester County Council BSA, 504 S. Concord Rd, West Chester, PA 19382

610-696-6621 ext. 25 or [milmanm@cccbsa.org](mailto:milmanm@cccbsa.org)