

Troop 181 Event Facts

Camp Henson – January Campout

Event and Dates	Camp Henson – Indian River Lodge (Capacity 24) January 12th – 14th, 2018 5700 Nanticoke RD Rhodesdale, MD 21659 phone 410-202-0053 http://www.delmarvacouncil.org/henson-scout-reservation/9338
Description	We will be staying in a more modern cabin with baseboard heating, indoor bathrooms and a full kitchen. Beds are bunk style with mattresses. We will stay in the cabin Friday and Saturday night, leaving after breakfast on Sunday.
Program, skills & advancement	On Friday night after we get to camp, troop leadership will meet with the camp ranger to decide on program specifics. We will be shooting either rifles or shotguns (probably rifles) for half a day on Saturday. The other half day will be a hike or archery. The exact timing of the events will be decided at camp.
Departure Date and Time	Meet at BUMC at 4:30 PM on Friday, January 12th. Departure 5:00 SHARP! BRING COMPLETED PERMISSION FORMS IF NOT TURNED IN EARLIER.
Departure Place	Berwyn United Methodist Church, Berwyn, PA. — Equipment shed in back. If you have a change that will not permit you to attend, or plan to drive on your own, please contact Kevin Maloney - 610-563-7596 .
Return Date, Time and Place	Sunday, January 14 th at perhaps 10 – 11am at BUMC. During car ride back to BUMC, we'll e-mail parents to advise ETA at BUMC. Please be available.
Cost	Campsite/Cabin is paid for from Troop funds. <ul style="list-style-type: none"> • Bring \$25.00 for food to the Troop Meeting and \$5 for shooting range fees on Tuesday, January 9, 2017. So, \$30 total fees per scout. Cash is preferable for the scouts to purchase food. • There is a trading post so a scout can bring some spending money if they wish to. <p style="text-align: center;">PLEASE TRY AND SIGN UP ONLINE BY JANUARY 2nd and FORMS AND FEES WILL BE DUE AT THE MEETING ON JANUARY 9th.</p>
Meals	Friday – Brown bag dinner during the car ride to camp. Saturday – Plan HOT breakfast COLD lunch and HOT dinner on Saturday. Sunday – Plan cold breakfast on Sunday.
Personal Equipment	Plan on winter camping weather – sleeping bags, warm night clothes – cabin heating system is good but it will still be cool. You should bring daytime clothes (layers of clothing [wool and thermal], warm dry socks (extra pair), comfortable walking shoes, (a hat, gloves, hand warmers and jacket) consistent with being outside most of the time during the day Saturday -- - check the weather. Bring water bottles, mess kit and flash lights. NOTE: A rain or snow shower is not out of the ordinary at this time of year...so make sure that you have rain gear. Also, cotton clothing (particularly jeans) are dangerous in the cold when wet and provided little insulating ability even when dry. For extend outdoor exposure, nylon scout pants atop wicking long underwear is recommended.
Special Information	Troop must bring: cooking and other utensils for preparing a HOT breakfast and HOT dinner. Troop should bring toilet paper, paper towels and trash bags. There is a refrigerator in the cabin.
Adult Drivers	
Emergency Phone Contact	Cell #'s - Scott Shreve 215-805-1243, Kevin Maloney (610) 563-7596, Ramesh Raghupathi (484) 645-1839

Troop 181 B.S.A.
Consent and Release

The undersigned parent/guardian of _____, hereby gives permission for him to participate with Troop 181, Chester County Council, BSA, in the following activity (ies):

CAMPING AT CAMP HENSON
Rhodesdale MD
January 12 - 14, 2018

I acknowledge that this activity may involve hazardous or strenuous activity. With that knowledge and understanding, I release the Boy Scouts of America, Troop 181, its adult leaders and or/its sponsoring organization from liability or claims of any kind or nature as a result of any injury, sickness or accident associated with or arising from the activity(ies).

In case of an emergency, the adult leader(s) on the activity (ies) have my permission to provide first aid (including over-the-counter medicines) or obtain any medical treatment considered reasonable or necessary at the time, and I agree to be responsible for the cost of any such treatment.

During this activity I can be reached, collect if necessary, at (_____)_____

Health Insurance Information:

Insurance Carrier _____ Group or Policy # _____

Medical Information:

Medical Restrictions? (Y) (N)
If "yes", please identify.

Allergies: _____

Are medicines or other precautions required? (Y) (N)

Signature: _____ Date: _____

Print Name: _____

