

Troop 219 Informational Handout

(www.troop-219.org or www.troop219.org)

● UPCOMING EVENTS/ACTIVITIES:

- May 31 Memorial Day Parade meet @ 8:30AM (no regular meeting)
- June 11-12-13 Summer Camp preparation campout and Court of Honor
- July 11 – 17 Summer Camp

Congratulations to Matt Rybar who sealed his OA membership as a Brotherhood Honor member at Cuwe Lodge's [wet] spring conclave this past weekend..

● FENTON MEMORIAL DAY PARADE

Monday, May 31st is Memorial Day and Troop 219 will again participate in the Fenton Memorial Day parade. This year is our turn to perform the flag ceremony at Oakwood Cemetery at the end of the parade. Mr Hussar, Mr Zimbler along with Nick & Garrett Stewart will be participating in the Mackinac Island Scout Service Troop and will not be in town for this event. All troop Scouts that are in town are expected to attend this important annual patriotic event in full Class A uniform. The PLC has a special practice planned on May 29th at 10AM at Mr. Hussar's house.

● IMPORTANT! CHILD ID FORMS AND HEALTH FORMS FOR SUMMER CAMP PERMISSION SLIP FOR CAMPOUT DUE JUNE 7, 2004

We will be returning **ALL** CHILD ID FORMS and Long Term Health Forms tonight, except for any completely updated forms (there's 1). We have 38 Scouts scheduled to attend summer camp, so far, and most of the CHILD ID FORMS are out of date and a number of Scouts will need new Health Forms signed by a physician/doctor.

Scouts (and adults under age 40) must submit a completed 4 page Tall Pine Council health form with a physician's signature dated on or after **July 17, 2001** (less than 3 years old) unless they intend to participate in COPE or some other high adventure activity. Adults age 40 and over, and Scouts who will participate in COPE or high adventure, must have a completed health form with a physician's signature on or after **July 17, 2003** (less than 1 year old). A properly executed health form from another source (eg: a sports physical) that contains a timely (*by the above dates*) physician's signature may be attached to PAGE 3 of the Tall Pine Council health form – but the remaining pages 1, 2 and 4 must still be completed or updated, and signed.

Even if your form has a physician's signature that is timely, the entire form must be updated by the parent/guardian **each year** prior to summer camp. You should update your Scouts age on each page as appropriate as well as the information on the last page listing who, besides leaders of the unit, your Scout may leave camp with. Parents must re-sign the health form each year that it's used on the last page; certifying all of the information (as corrected/updated) on the form.

Over the weekend of June 11-12-13, 2004 is a pre-summer camp campout at Dr. Waters' property. This campout is designed to provide the specially constructed summer camp patrols to work together before summer camp, and the cost of this campout is included in the total troop summer camp cost. Attendance is mandatory if you're going to summer camp.

There will be a Troop Court of Honor on Saturday night of this campout, for parents and family.

Larry Zimbler
Scoutmaster-Boy Scout Troop 219

PRE-SUMMER CAMP CAMPOUT AND COURT OF HONOR

JUNE 11 - 13, 2004

PERMISSION SLIP AND HEALTH FORM

(return by Monday, JUNE 7, 2004)

COST FOR THIS CAMPOUT ARE INCLUDED IN THE TROOP SUMMER CAMP FEES

REGISTRATION: Adult or Scout's Name: _____

_____ has my permission to attend the Troop 219 pre-summer camp campout at Dr. _____
(name)
 Waters' property 13229 White Lake Rd Fenton (on White Lake Rd, just east of Fenton Rd south of town) from Friday, June 11, 2004 through Sunday, June 13, 2004

Scouts should be dropped off at Dr. Waters' house 13229 White Lake Rd Fenton by 6:00PM on Friday, June 11, 2004, having eaten dinner. Scouts should be picked up at the same location on Sunday morning at 10AM. Clothing, gear and "luggage" should match the weather forecast for the weekend.

In case of emergency, notify:

Name		Relationship	
Address:			
Primary Phone:	()	Alternate Phone:	()
Physician Name:		Physician Phone:	()
Health Insurance Company:		Policy Number:	

- This scout takes no medications and has no known allergies.**
- This scout takes medication or has allergies as follows:** *(Attach additional pages if necessary)*

The health information contained herein is correct so far as I know and the person herein described has permission to engage in all prescribed activities, except as noted above. In the event I cannot be reached in an emergency, I hereby give permission to the medical provider selected by a designated representative of Troop 219, Boy Scouts of America to authorize emergency medical or surgical treatment, routine non-surgical medical care, hospitalize, secure proper anesthesia, or to order injection(s) for my child. The person herein described is in good health, has all required immunizations current, and I assume the health responsibility for the individual.

Authorization is granted for the release of the aforementioned individual to registered adult volunteers of Troop 219, Boy Scouts of America. In addition to the parent(s) or guardian(s) signing this form, only those individuals listed below are authorized to remove the aforementioned individual from camp during their period of camping:

Name:	Relationship ‡

Parent/Guardian Signature		Parent/Guardian Signature	
X		X	
Print Name	Date	Print Name	Date