

# Troop 17

## Wichita Mountains Campout

### March 24, 2018

We will meet at the Harry Male Scout Lodge Friday evening, March 2nd, at 5:30 pm. Bring a sack dinner to eat on the bus while we drive to Wichita Mountains Wildlife Refuge. Friday night we will camp in the Fawn Creek camping area. We will return to Fort Worth Sunday afternoon at approximately 4:00 pm. As always, parents we will call upon our return, (this way they don't have to sit around and wait while we off-load our gear)

Lunch for Saturday will be the type you can cook using a small backpacking stove or does not require cooking. Each Patrol will have its own stove. If you have your own stove and want to bring it, please tell you Patrol Leader. You will also want high energy snacks to eat while hiking and maybe some powdered Gatorade to mix and drink.

Total cost will be \$30: Food (\$20) Transportation (\$10) Please bring your money in CASH and permission slip the Tuesday before the campout. Remember, Patrol Leaders always prefer cash, it makes shopping for food easier.

Gear List: Please put your name on everything.... our lost and found department is overflowing!

**Backpack-** Daypack waist belt is best. Borrow one if you don't have one yet.

**Tent & ground cloth-** Two people only share a tent. No hotel tents! Organize your tent mate before going!

**Bedroll-** If it's big & bulky, use a compression bag. A fleece liner will be worth carrying! Sleeping pad too!

**Rain gear-** A rain suit works best. Waterproof stuff sacks are recommended for clothing and sleeping bags. A waterproof pack cover seals the deal & will help keep everything dry.

**Rope-** always bring 20-30 ft. lightweight nylon parachute cord is best.

**Clothes-** Layering works best! While hiking you will heat up even if it's cold. Wear clothes that breathe & wick moisture (sweat) away from you. A warm jacket that zips will help you control your body temperature. Primarily you will be wearing everything you need (long pants, long sleeve shirt, & fleece). Bring extra socks & undies. Watch the weather...long underwear, gloves, warm cap??

**Hiking Boots-** Well broken in. Do not, I repeat do not bring new or almost new hiking boots on this trip. Make sure you can walk in them comfortably all day now, before you go on this campout!

**Extra Pair of Shoes -** Light weight for in camp use.

**Full Class "A" Uniform-** with T-17 neckerchief. Troop Hats only!

**Towel -** Old, very small and very lightweight.

**Cup, plate or bowl, & eating utensils-** lightweight plastic.

**Flashlight-** Very small with extra batteries.

**Compass-** 2nd Class requirement #4 can be done on this campout with compass, paper & pencil.

**Canteen-** Nalgene bottles with a wide mouth are best for mixing powdered drink mixes.

**Water Tablets / Polarpure-** We may need to purify water.

**Personal Hygiene Kit-** Think small, just the minimal essentials.

**Personal First aid Kit-** Once again think small, the regular stuff plus stuff for blisters (moleskin).

**2-Two liter pop type bottles-** with strong screw on tops. They need to clean and full of water. You will use one for drinking & the other for cooking.

**Garbage Bags-** Bring two or three to use as pack cover, raincoat, stuff bag, ground cloth, trash, etc.

**Money-** A few dollars to spend if we have time to stop on the way home. (It's up to the "Mama")

You don't need much else...just come ready to have fun!

**We will be taking a day hike on Saturday in addition to some excellent bouldering and scrambling in the Valley of Boulders in Charon's Garden Wilderness. Hike is a class 1 (easy) trail about 5 miles round trip with 150 feet of elevation change. Traversing the Valley of Boulders is a fun, class 3 scramble.**

.....If you have any questions call your Patrol Leader.....

# Troop 17

## Activities Permission Slip and Release

**Activity**     Overnight Campout    \_\_\_ Long Term Camp    \_\_\_ Hike  
              \_\_\_ Field Trip                                    \_\_\_ Other: \_\_\_\_\_

**Destination**    \_\_\_ WR    \_\_\_ SR2    \_\_\_ MC    \_\_\_ MW    \_\_\_ CC  
               Other: Wichita Mountains National Wildlife Refuge-Fawn Creek 580-429-3222

**Departure**    5:30 pm    2 March                    **Return** 4:00 pm    4 March                    (Scouts will call)

**All departures and arrivals will occur at the Scout lodge unless given prior permission.**

**Aquatics**    Aquatic activity \_\_\_ will /  will not be involved.

**Activity Fee**    \$30.00 Total (\$ \_\_\_ camp fee + \$ \_\_\_ equipment fee + \$20.00 food + \$10.00 transportation)

Location key :    CC – Camp Constantin, Graford, TX 940-779-2131  
                      MC – McClure Property @WR (On WR Road, before the main gate)  
                      MW – Mineral Wells State Park, Mineral Wells, TX 940-328-1171  
                      SR2 – Sid Richardson Scout Ranch, Runaway Bay, TX 940-575-4243  
                      WR – Worth Ranch, Palo Pinto, TX 940-659-2195

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### Medical Release and Waiver of Liability

\*\*\* Return this portion to your Patrol Leader \*\*\*

Boy Scouts of America Troop 17, chartered by St. Stephen Presbyterian Church

I understand that participation in the **activity involves** a certain degree of **risk**. In consideration of the benefits derived and acknowledging the risks both known and unforeseeable, I agree to my son(s) / ward(s) \_\_\_\_\_ participation in the activity and specifically and irrevocably **waive all claims** and future claims against the leaders, officers, agents, representatives, volunteers, and committee members of Troop 17, the Longhorn Council, Boy Scouts of America, St. Stephen Presbyterian Church, and the sponsor. I further acknowledge the fact that the Boy Scouts of America is an education institution which **requires participants to abide** by applicable **rules and standards**. I have full confidence that every reasonable precaution will be taken to ensure the safety and well being of the participants. In the event of an emergency, the adult volunteer in charge of the scene has my **permission to obtain medical treatment**, including hospitalization, anesthesia, surgery, or injections of medication at the nearest hospital or doctor, at my expense. **Medical providers are authorized to disclose** to the adult in charge examination findings, test results, and treatment provided for the purpose of medical evaluation of the participant, follow-up and communication with the participant's guardian, and/or determination of the participant's ability to continue in the Troop's activity.

Parent/Guardian Signature \_\_\_\_\_ Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Emergency contact numbers \_\_\_\_\_ Date of participant's last tetanus shot \_\_\_\_\_

List all participant's medications and dosing instructions: \_\_\_\_\_

\_\_\_\_\_

List all participant's allergies, including drug allergies: \_\_\_\_\_