

9th Annual Ten Commandments Hike

Friday, November 28, 2008

Sponsored by the Committee on Scouting and Youth Ministry of the Queens Federation of Churches

UNIT REGISTRATION FORM

Unit # _____ Type: _____ District: _____ Date: _____

Leader: _____ Address: _____ ZIP: _____ Telephone: (_____) _____

All units must have a minimum of two adults to comply with BSA's deep leadership requirement. Tour permits must be presented at the registration/check-in on the day of the hike in order to participate. The Name, Address, Telephone must be indicated for each Adult or Youth who will attend the Hike. Payment in full must accompany this registration form.

Use one line person attending the hike. Thank you.

	Name	Address	ZIP	Telephone	Youth	Adult	Paid
1				()	<input type="checkbox"/>	<input type="checkbox"/>	
2				()	<input type="checkbox"/>	<input type="checkbox"/>	
3				()	<input type="checkbox"/>	<input type="checkbox"/>	
4				()	<input type="checkbox"/>	<input type="checkbox"/>	
5				()	<input type="checkbox"/>	<input type="checkbox"/>	
6				()	<input type="checkbox"/>	<input type="checkbox"/>	
7				()	<input type="checkbox"/>	<input type="checkbox"/>	
8				()	<input type="checkbox"/>	<input type="checkbox"/>	
9				()	<input type="checkbox"/>	<input type="checkbox"/>	
10				()	<input type="checkbox"/>	<input type="checkbox"/>	
11				()	<input type="checkbox"/>	<input type="checkbox"/>	
12				()	<input type="checkbox"/>	<input type="checkbox"/>	
13				()	<input type="checkbox"/>	<input type="checkbox"/>	
14				()	<input type="checkbox"/>	<input type="checkbox"/>	
15				()	<input type="checkbox"/>	<input type="checkbox"/>	
16				()	<input type="checkbox"/>	<input type="checkbox"/>	
17				()	<input type="checkbox"/>	<input type="checkbox"/>	
18				()	<input type="checkbox"/>	<input type="checkbox"/>	
19				()	<input type="checkbox"/>	<input type="checkbox"/>	
20				()	<input type="checkbox"/>	<input type="checkbox"/>	

Total Participants _____ @ \$6.00 each = \$ _____ # Youth _____ # Adults _____

Registration Forms must be mailed by November 1, 2008, or brought to the November Round Table. Please indicate special diet needs on the back of this form.

Mail with check payable to: Queens Federation of Churches, Ten Commandments Hike, 86-17 105th Street, Richmond Hill, New York 11418-1597

Registration may also be made and paid online at www.QueensChurches.org; click PROGRAMS and follow the link for Scouting/Youth Ministry and then Ten Commandments Hike

LOCAL TOUR PERMIT APPLICATION

FOR TRIPS AND CAMPS UNDER 500 MILES

LOCAL PERMIT NO. _____ DATE ISSUED _____

This application must be filed with local council service center two weeks in advance of scheduled activity for proper clearance. It is used for trips of less than 500 miles. If destination is 500 miles or more one way or outside the U.S.A. (local council camp excepted), use National Tour Permit Application, No. 4419C. Units going into wilderness or backcountry areas must carry a copy of and abide by the principles of Leave No Trace, No. 21-105.

No. _____ Town _____ District _____ hereby applies
Type of unit
 for a permit and submits plans herewith for a trip from _____, 20____, to _____, 20____.
Date Date

Give itinerary if tour; or destination if camp, including route description for reaching campsite (for long trip attach map indicating route and overnight stops):

Type of trip: One day Touring camp Short-term camp Long-term camp (Furnish copy of program and menus.)

Activity Standards: Where swimming or boating is included in the program, Safe Swim Defense, No. 34370A, and/or Safety Afloat, No. 34368B, standards are to be followed. If climbing/rappelling is included, then Climb On Safely, No. 3206 (which recommends the American Red Cross's standard first aid and When Help Is Delayed or equivalent course), must be followed.

One adult in the group must be trained as outlined:

Name	Age	Safe Swim Defense Expiration Date	Safety Afloat Expiration Date	Climb on Safely Date Taken

At least one person must be trained in CPR from any recognized agency for Safety Afloat and Climb On Safely.

Name	Age	CPR Training	Agency	Expiration Date

At least one adult on a pack overnighter must have completed Basic Adult Leader Outdoor Orientation (BALOO, No. 34162A).

Name	Age	Date BALOO Training Completed

Mode of transportation: Car RV Van Bus Boat Canoe Train Hiking Truck Other _____

(The beds of trucks and camper trucks are approved for equipment only—passengers are allowed only in the cab.)

Tour will include _____ youth and _____ adults. Have parents' approvals been secured? _____

It is the tour leader's and unit committee member's understanding that all drivers, vehicles, and insurance coverages will meet the national requirements as listed on the reverse side of this application.

Leadership and personnel: Boy Scouts of America policy requires at least two adult leaders on all camping trips and tours. Coed Venturing crews must have both male and female leadership. The adult leader in charge of this group must be at least 21 years old.

Youth Protection Training:

- All registered adults participating in any nationally conducted event or activity must have completed the BSA Youth Protection Training.
- At least one registered adult who has completed BSA Youth Protection Training must be present at all other events and activities that require a tour permit.

Tour leader's name _____ Age _____ Phone _____
Print or type

Address _____

I have in my possession a copy of *Guide to Safe Scouting*, No. 34416D, and have read it. _____
Tour leader's signature

Assistant tour leader's name _____ Age _____ Phone _____

Address _____

Signed by member of unit committee _____

Signed by tour leader _____

RETAIN IN COUNCIL SERVICE CENTER

**OFFICIAL LOCAL TOUR OR CAMP PERMIT
BOY SCOUTS OF AMERICA**

This permit should be in the possession of group leader at all times and displayed when requested by Scouting officials or other duly authorized persons.

Permit issued to _____ No. _____ Town _____
Type of unit

Name of tour leader _____ Age _____ Address _____

Name of tour leader _____ Age _____ Address _____

Permit covers all travel between _____ and _____

Dates of trip from _____, 20____, to _____, 20____

Total youth _____ Total adults _____

This group has given the local council every assurance that they will conduct themselves according to the best standards of Scouting and observe all rules of health, safety, and sanitation as prescribed by the Boy Scouts of America and as stated in the Pledge of Performance on the reverse side of this permit.

These spaces are for the signatures and comments of officials where the group camps or stays for one night or more. Signatures indicate that the cooperation and conduct of the Cub Scout, Boy Scout, Varsity Scout, or Venturing group were satisfactory in every way.

Date	Place	Signature	Comment

Local Permit No. _____
 Date Issued _____

Council Stamp

Not official unless council stamp appears here.

_____ Council name and address

_____ Council phone no.

_____ Signed for the council

