

TROOP 1589 Madison Heights, MI

**Great Lakes Council
North Star District**



Scouts BSA

Dear Boy Scout and Parents:

Our Troop 1589 is planning a camp out for the Boy Scouts of our Troop on the weekend of May 17-19, 2019. This campout will be at the Ortonville Recreation Area, which is located at 5779 N Hadley Rd, Ortonville, MI 48462. We will camp in tents.

Directions to the Ortonville Recreation Area are: 1.) From Edmonson School proceed westbound on East Katherine Avenue. 2.) Turn right onto northbound John R. Road and proceed to the traffic signal. 3.) Turn left onto west-bound Twelve Mile Road and proceed to the first freeway entrance. 4.) Enter toward the right onto the entrance ramp and proceed on northbound I-75 approximately 27 miles to Exit 91. 5.) Take the MI-15 exit, EXIT 91, toward Clarkston/Davison. 6.) Turn right onto Ortonville Rd/MI-15 approximately 8 miles. 7.) Turn right onto Oakwood Rd approximately 3.9 miles. 8.) Turn left onto N Hadley Rd approximately 1.25 miles. 9.) 5779 Hadley Rd, Ortonville, MI 48462-9600, 5779 HADLEY RD is on the right.

We will depart from the Edmonson School parking lot on Friday, May 17, 2019, at 6:00 pm, and will return back there on Sunday, May 19, 2019, at 11:00 am. We will travel in **full Boy Scout Class A Uniforms**.

Please return the enclosed permission slip and payment forms to the Troop by Thursday, May 9th.

The Tour Leader in charge for this trip will be:

Daniel A Gunther, Scoutmaster, Phone: (586) 817-0564
47767 Kelston Dr. Macomb, MI 48044
Email: dannyagunther@gmail.com

The cost of the weekend trip is Twenty Dollars (\$20.00) per person. Due May 9th.

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EQUIPMENT LIST

Equipment Required (Must Have):

- Sleeping bag or bed roll, and pillow, (and other bedding items)
- Shoes and hiking boots, (must pack an extra pair)
- Socks and extra socks (Wool is preferred)
- Underwear, t-shirts, and shorts, (and thermal underwear or sweat suit)
- Coat, hat, and gloves; and sweater or jacket
- Toilet articles (comb, soap, washcloth, towel, toothbrush, toothpaste, dental floss Deodorant, and toilet paper)
- Mess Kit (plate, bowl, cup, fork, knife and spoon.
- Warm camp clothing
- Raincoat and waterproof boots
- Daypack to carry water, lunch and snacks
- Boy Scout Handbook
- Flashlight or Electric Lantern
- Medications in Ziploc bags (Must be turned over to leaders with dispensing Instructions)

Equipment Desired:

- Field/Scoutcraft Books
- Merit Badge Pamphlets
- Compass
- First Aid Kit
- Pocket Knife (Boy Scout only, w/ Tote 'n Chip)
- Inexpensive Camera
- Campfire songbook

Equipment NOT Allowed:

- Radios or Television
- Electronic Games
- Expensive Jewelry

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(Note that this is a legal document, giving Troop 1589 Leaders both specific and general authorizations in caring for and protecting your son. Please read carefully and fully complete, using your son's full legal name, which may be very important in case of an emergency. Also use a different Permission Slip for each son.)

PERMISSION SLIP

My son _____ has my permission to go with Troop 1589 on its May 17, 2019 to May 19, 2019 Boy Scout campout at the Ortonville Recreation Area. I will oversee him in packing clothing, sleeping gear, and other provisions to be adequately prepared for the expected activities and weather conditions. I will provide him with transportation to and from the Edmonson School parking lot, making reasonable allowances for possible early or late return arrivals of the troop. I understand that circumstances may develop during the trip in which the troop leaders may require me to pick my son up at camp before its scheduled termination. Please note the following restrictions regarding his participation, or special needs for medications, treatments, observations, supervisions, disciplines, or other protections:

Also for the weekend:

_____ will attend. _____ will drive.

Driver's Name: _____ Driver's License No.: _____ Exp.: _____

Vehicle Owner's Name: _____ Model Year: _____ Make & Kind: _____

No. of Seat Belts: ____ Insurer: _____ Pub. Liability: ____/____ Prop. Dam.: _____
per person per accident

Please be aware the following scheduling, vehicle, or insurance information and requirements related to my son's or our family's travel to or from camp. (If you designate yourself as a driver, you must state any and all restrictions on your traveling itinerary both back and forth with the troop. You must also identify any vehicle or insurance information change since your last submission.)

In case of an emergency, I can be notified at:

(____)_____ Cell Home Work for _____

(____)_____ Cell Home Work for _____

(____)_____ Cell Home Work for _____

(____)_____ Cell Home Work for _____ during the trip. In the event I cannot be reached, I hereby authorize Troop 1589 Leaders of the Boy Scouts of America to obtain urgent or routine medical and surgical treatments for my son in my behalf and absence, including, but not limited to, hospitalization, anesthesia, casts, sutures, medications, injections, and transfusions. I also agree to be personally responsible for all expenses incurred for such treatments, including, but not limited to, medications, appliances, equipment, tests, x-rays, transportation, facilities, and professional services.

Parent Signature: _____

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PAYMENT FORM FOR WEEKEND CAMPERS

I (We) plan to attend the May 17 – May 19, 2019 camping trip to Ortonville Recreation Area with Troop 1589 at a cost of \$20.00 (Twenty Dollars) per person. I (We) understand that any excess payment amount tendered will be credited to my (or my son's) account, and don't expect any change to be provided. My (Our) payment(s) is (are) as follows:

Name: _____ Amount: \$20.00
cash check # _____ account deduction authorization Credit Card

Name: _____ Amount: \$20.00
cash check # _____ account deduction authorization Credit Card

Name: _____ Amount: \$20.00
cash check # _____ account deduction authorization Credit Card

Name: _____ Amount: \$20.00
cash check # _____ account deduction authorization Credit Card

Name: _____ Amount: \$20.00
cash check # _____ account deduction authorization Credit Card

Note: *If paying by credit card there will be a 3% or \$1 additional charge to cover the costs.*

Total \$ _____

Signature: X _____ Date: _____

FOLD AND TEAR ALONG DOTTED LINE

FOLD AND TEAR ALONG DOTTED LINE

FOLD AND TEAR ALONG DOTTED LINE

Date: _____

Received from _____,

The sum of _____ \$ _____ in cash, and also

The sum of _____ \$ _____ from check # _____

as payments toward the May 2019 camping trip to Ortonville Recreation Area. Your (or son's) account will also be deducted in the amount of \$ _____. You were also given a credit of \$ _____ for _____.

Signature _____