

# BSA Troop 3552 Palmdale Ca.

## Outing Check List & Roster

Start Date  End Date  Filed Date

	Position	CPR	First Aid	Safety Afloat	Weather Hazard	Safe Swim Defence	Fire Permit	Climb On Safely	HAT
<b>Outing Leader</b> _____	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cell # <input type="text"/> Emer # <input type="text"/>									
<b>1st Assistant</b> _____	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cell # <input type="text"/> Emer # <input type="text"/>									
<b>2nd Assistant</b> _____	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cell # <input type="text"/> Emer # <input type="text"/>									

Total cost per person  Water Available:

Filters Required:

Includes Food  Includes Camp Site

Pack It Out:  Facilities Available:

Cat Hole:  Checklist Completed:

Kybos:  Showers:

Cell Phone Accessable:

Type of Outing

Location of Outing

HAT Outing  HAT Application Completed  LNT Outing

<b>Senior Scout</b> _____	Rank <input type="text"/>	Position <input type="text"/>
Emer # _____		
<b>1st Assistant</b> _____	Rank <input type="text"/>	Position <input type="text"/>
Emer # _____		
<b>2nd Assistant</b> _____	Rank <input type="text"/>	Position <input type="text"/>
Emer # _____		

Scout Assistants, circle the names of the Scouts below who you are responsible for during this outing. Number of Vehicles

**List Attendees in boxes below**

Scouts	Registered Adults	Webelos	Webelos Parents	Non Registered Adults

## Responsibility List

Completed

Tour Permits:

Reservations:

Food:

Fuel Cannisters:

B/U Fuel:

Firewood:

Water:

Troop Trailer:

Menu, Leaders:

Menu, Scouts:

Menu, Webelos

Menu, Guests:

## Backpack Inspection

Inspection Date:

Inspection Results:

Reinspection Date:

Inspection Results:

## Activity for Rank Advancement

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## Planning Guide

1. Parents notified of hiking route?
2. Committee approval of hiking route?
3. Adequate transportation to and from hiking area?
4. All drivers meet minimum age limits as shown on BSA tour permit?
5. All cars have minimum California Insurance - \$30,000, \$15,000 coverage?
6. Adequate menu for hike providing balanced diet for everyone?
7. All participants shall meet the units/group personal equipment list requirements.
8. Tour permits requested and received?
9. U.S. Forestry fire permits obtained if required - in Angeles, Los Padre, San Bernardino, and Cleveland National Forests.
10. Outing Leader knows where closest Ranger Station is \_\_\_\_\_
  - i. Phone is \_\_\_\_\_
  - ii. Hospital or emergency center is \_\_\_\_\_
11. Outing Leader knows who to contact for help (a) Sheriffs Dept. (b) Highway Patrol (c) Mountain Rescue (d) Other \_\_\_\_\_
12. Itinerary written out so one can be given to:
  - i. Someone at unit level at home, Name: \_\_\_\_\_
  - ii. Ranger
  - iii. Filed with award application if required
13. Any and all special permits requested for and obtained prior to taking the hike. (i.e., wilderness, National Park, National Monument, etc.).
14. Adequate group First Aid Kit for hike.
15. Have plans for advancement on Outing/Hike been established and included in hike plan.
16. Have plans for earning advancement requirements been included in the hike plan.

17. Type of hike: rain; snow; sunny desert; mountain; beach; etc. are your prepared for these?
18. Adequate Group equipment for this hike?
19. Are we within the maximum group size for he area the hike is in.
20. Do we have two 21 year or older adults minimum for the group - (recommended one adult for each 10 youths - minimum 2 adults per group)?
21. Roster with name, address, phone number of each youth and adult going on trips and with whom to notify in case of emergency.
22. Does each youth and adult participant have an Emergency Medical Release form signed by his parents or guardian - one on his person and one in his personal First Aid Kit in his pack?
23. Does unit have Emergency Medical Release forms for each youth and adult participant in the unit/group first aid kit?
24. Any special equipment needed for this hike - i.e., snowshoes, climbing rope, ice ax, etc.
25. No one on hike is carrying or has firearms or alcoholic beverages in his or her possession unless specifically required for their profession or re quired for medical reason.
26. All pets left at home except seeing eye and hearing impairment dogs.
27. All participants are familiar and checked out on the usage of the unit/group backpacking stove. - Whatever the type may be?
28. All participants of the hiking group are current registered members of the BSA or GSA programs.
29. All participants of the hiking group have individual identification on them.
30. All adult participants of the hiking group are familiar with the Council Emergency Notification Form.
31. Recommended all participants of the hiking group has had a medical exam - maximum 4 months prior to the long-term hike.

