

**BOY SCOUTS OF AMERICA**

# 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 2 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. 4419B.

**If backcountry trip, be sure to know BSA Wilderness Use Policy.**

**Troop** \_\_\_\_\_ No. **152** Town: **Cuyahoga Falls** District: **MOE** hereby applies for a permit and submits plans herewith for a trip from July 1, 2001 to July 7, 2001

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

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

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' 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

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

**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 parent's approvals been secured? \_\_\_\_\_

It is the tour leaders' 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:** The Boy Scouts of America policy requires two adult leaders on all camping trips and tours. Tour leader in charge must be at least 21 years of age.

**Tour leader's name :** Daniel Engerer Age 41 Phone 330-688-7126  
Print or Type

Address \_\_\_\_\_

I have in my possession a copy of Guide to Safe Scouting, No. 34416B, and have read it. \_\_\_\_\_ (Tour Leaders Signature)

Assistant leader's name \_\_\_\_\_ Age \_\_\_\_\_ Phone \_\_\_\_\_

Signed by member of unit committee

Signed by tour leader

**RETAIN IN COUNCIL SERVICE CENTER**

**COMPLETE AND RETURN TO UNIT**

**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 \_\_\_\_\_

Assistant tour leader \_\_\_\_\_ Age \_\_\_\_\_ Address \_\_\_\_\_

Permit covers all travel between \_\_\_\_\_ and \_\_\_\_\_

Date of trip from \_\_\_\_\_ 19 \_\_\_\_\_ to \_\_\_\_\_ 19 \_\_\_\_\_

Total youth \_\_\_\_\_ Total adults \_\_\_\_\_

The 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 1 night or more. Signatures indicated that the cooperation and conduct of the Cub Scout, Boy Scout, Varsity Scout, or Explorer 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

