

SUMMER'S ENDING TROOP GEOCACHE

(Keep this part of trek form for reference)



Date/Time: Sunday, August 10, 2014 - 1:00 – 5:00 pm

Description: Come and help Troop 777 find all of the 50+ Geocaches hidden along and around the trails of San Elijo Hills. Scouts will be divided into small groups and given a couple of hours to find as many geocaches as possible while working on their orienteering and navigation skills. New to geocaching? Find out more at <http://www.geocaching.com/guide/default.aspx>

Location: **San Elijo Hills Town Square**
San Elijo Road and Elfin Forest Road, San Marcos CA 92078
<https://www.google.com/maps/place/508+Elfin+Forest+Rd+E,+San+Marcos,+CA+92078>
Meet by the fountain in the middle of the town square.

Cost: No Cost!!

Equipment: **Required Equipment:** Class B, ten essentials in a daypack, and hiking boots/athletics shoes (you will end up hiking a couple of miles).

Optional Equipment:

- “Treasures” to exchange with geocaches found
- GPS Unit, or
- Fully charged Smartphone with c: *geo app* for Android (<http://www.cgeo.org/>) or *GeoCaching Intro app* for iPhones (<https://itunes.apple.com/us/app/geocaching-intro/id329541503?mt=8>)

There is no need to purchase any smartphone geocaching apps (use the free ones) or set up a membership at geocaching.com. Printed sheets with the locations of geocaches in the area will be provided.

Instructions: Email Mr. Uwins no later than August 8 if you would like to participate. Include if you will bring a GPS, iPhone, or Android phone and if you have geocached before. Final trek instructions will be sent out on August 9.

Permissions slips can be turned in prior to the event or brought to the event.
SCOUTS WILL NOT BE ABLE TO PARTICIPATE WITHOUT A TREK FORM.

Scout in Charge: TBD
Adult in Charge: James Uwins – (760) 815-7012 / james_uwins@yahoo.com
Emergencies: Jennie Uwins – (760) 815-6729

(Return this part with parent signature)

Summer's End Troop Geocache

Sunday, August 10, 2014 – 1:00 pm-5:00 pm

Scout(s) Attending: (1) _____; (2) _____

BSA Health & Medical Form (Completion Date): (1) _____
Valid for one (1) year from date of completion (2) _____

Cook Master (Circle one): **YES/NO** Assistant Cook Master (Circle one): **YES/NO**

Adult(s) Attending: (1) _____; (2) _____

Required

- Youth Protection Training (Completion Date): (1) _____
Valid for two (2) years from date of completion (2) _____
- BSA Health & Medical Form (Completion Date): (1) _____
Valid for one (1) year from date of completion (2) _____

Additional Training for High Adventure Treks:

- CPR (Completion Date) _____
- First Aid (Completion Date) _____
- Climb On Safely (Completion Date): _____
- Physical Wellness (Completion Date): _____
- Safe Swim Defense (Completion Date): _____
- Safety Afloat (Completion Date): _____
- Trek Safely (Completion Date): _____
- Weather Hazards (Completion Date): _____
- Other: _____

Special Info: _____

I Can Drive: _____. Reimbursement for gas by Scout Account: _____ or Check _____

| | | | | PUBLIC LIABILITY | | |
|-------------------------------------|---------------|----------------|--------------|------------------------------|-------------------------------|--------------------------------|
| Make, Model, Year, Color of Vehicle | License Plate | # of Seatbelts | Owner's Name | Each Person (min = \$50,000) | Each Accident (min=\$100,000) | Property Damage (min=\$50,000) |
| N/A | N/A | N/A | N/A | N/A | N/A | N/A |

Amt Pd: \$ _____ ea. x # _____ = \$ _____ Cash _____ Check _____ Scout Account _____
(Make checks payable to BSA Troop 777)

I understand that participation in activities offered through Boy Scouts of America (BSA) Troop 777 involves a certain degree of risk that could result in injury or death. In consideration of the benefits to be derived and after carefully considering the risks involved, and in view of the fact that the BSA Troop 777 is an organization in which membership is voluntary, and having full confidence that precautions will be taken to ensure the safety and well-being of my Scout(s), I have given (1): _____; (2) _____ (name), my consent to participate in the activity above on the dates shown above.

By signing below, I certify that the above information is true and accurate to the best of my knowledge. I understand that I may be required to supply proof of any of the above information and I or my Scout(s) may be denied permission to participate if the requested information is not provided.

Signature of Adult(s), Parent(s) or Legal Guardian(s): _____ Date _____
_____ Date _____