

Cub-ON Leaders and Parents' Guide

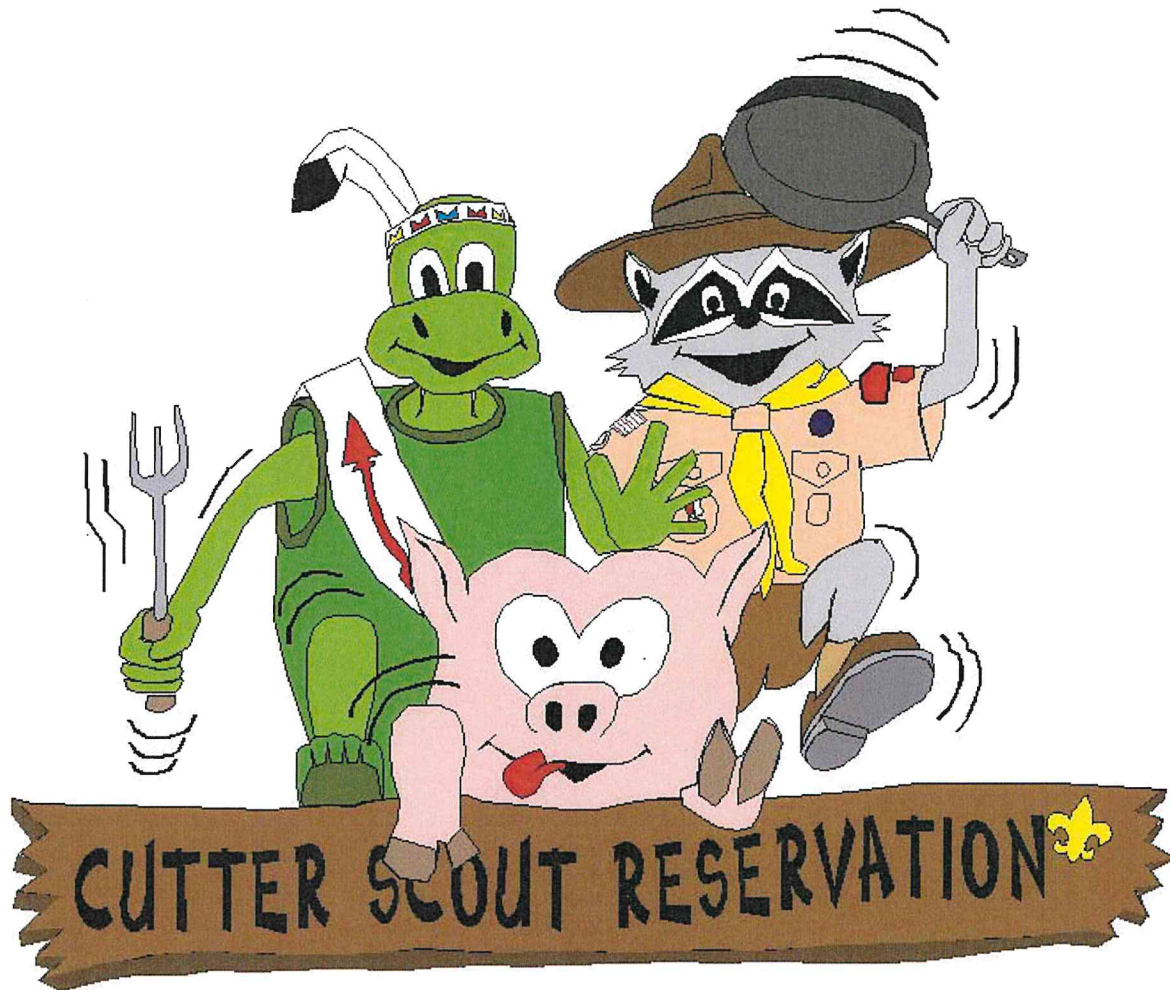


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A Message to Cub Scout Leaders and Parents

On behalf of the Pacific Skyline Council, thank you for coming to Cub-ON and welcome to Cutter Scout Reservation!

Cub-ON is an event that goes back over thirty years, and we're glad you're here! From first-time visitors to veteran Scouts and Scouters, this weekend's stay is the perfect opportunity for you to get acquainted with our camp, enjoy the outdoors and the fellowship of your fellow Scouting families.

We've written this Leaders' Guide to help you prepare your unit for a fun and unforgettable weekend! Our camp staff is dedicated to providing you with a great Scouting experience! But remember, in Scouting, we all work together. Each adult is required to help with (at least) one Kitchen Shift in our dining hall (Harkson Lodge) and one Activity Shift in one of our program areas. Show your Scouts how to "**Do your Best!**" Your Scouts will thank you and always remember the efforts that their leaders and parents put forth to help them have a memorable experience.

Yours in Scouting,



Thomas Kenney

District Director, Redwood District

Cub-ON Staff Advisor

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Office 650-3415633 x 114

Mobile 415.608.1982

Special note:

- **Print the pages 11-19, double sided for use at camp.**
- **Parking Restrictions implemented see pages 7,8, 16**

Cutter Scout Reservation

About Cutter Scout Reservation



Cutter Scout Reservation is in the Santa Cruz Mountains (San Mateo County), and is about 2,200 feet in elevation and is in some of the last old-growth redwoods on the west coast. Cutter Scout Reservation is one of three camps operated by the Pacific Skyline Council. The additional camps are nearby Boulder Creek Scout Reservation (Boulder Creek) and our Boy Scout camp, Camp Oljato (near Henderson Lake in the Southern Sierras).

Cutter Scout Reservation is open year-round and has an on-site Ranger (caretaker). The camp has numerous facilities spread across more than 300 acres to ensure a high-quality camping experience

for even the most veteran camper:

- 15 Campsites to accommodate up to 600 campers (400 max for Cub-ONs)
- Lake Gamlen for Fishing (catch & release only) and watercrafts
- Shooting Sports Ranges for Archery (Cub Scouts and Boy Scouts), BB Gun (Cub Scouts), Rifle & Shotgun (Boy Scouts only)
- Orienteering Course
- Pool with Shower Facilities
- Harkson Lodge has a full-service kitchen (the lodge can accommodate up to 200 campers), sleeping areas and toilet facilities with ADA access

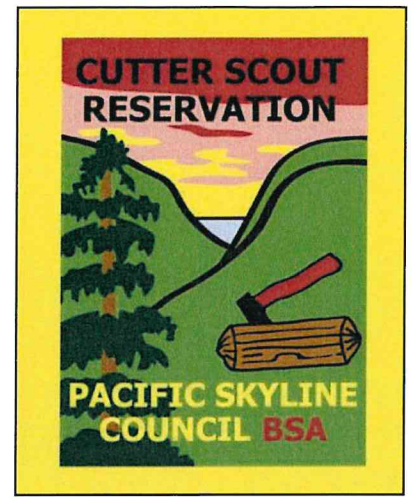
The weather in camp is temperate year-round, but conditions can change quickly. Campers should be prepared and pack accordingly. Bring clothes to layer, hats & gloves, and rain gear. Long-sleeved shirts and pants are preferred to protect against ticks, mosquitos, poison oak and other natural hazards.

Crew 869 (Cub-ON Staff)

Cub-ONs and other events at Cutter Scout Reservation are supported by a co-ed Venturing Crew – Crew 869. Venturing is the BSA's older youth program and provides additional leadership and high adventure opportunities for youth aged 14 - 21. Please ask our camp staff if you would like additional information about the Crew and how it helps to further camping opportunities in our Council.

Host Boy Scout Troop

Each Cub-ON is staffed by a different "Host Troop." Boy Scouts, under the direction of their Scoutmaster and with support from Crew 869, are further able to develop their leadership skills by acting as Den Chiefs throughout the weekend. Please ask our camp staff if you would like additional information about this program.



...Do Your Part, Do Your BEST

Scouting runs on volunteer power! All adults are required to perform at least ONE shift in our Dining Hall and at least ONE shift in one of our program areas. **Please sign up for your shifts at Check-in.**

Show your Scouts how to "Do Your Best!" Your Scouts will thank you and always remember the efforts that their leaders and parents put forth to help them have a memorable experience.

Youth Protection

The Boy Scouts of America places the greatest importance on creating the most secure environment possible for our youth members.

Required Training

- Youth Protection training is required for all BSA registered volunteers.
- Youth Protection training must be taken every two years. If a volunteer's Youth Protection training record is not current at the time of recharter, the volunteer will not be reregistered.
- Training to be taken at my.scouting.org

(Excerpted from *The Guide to Safe Scouting*, No. 34416, 2013 Printing)

Cub-ON Information

Registration

Register for Cub-ON at bit.ly/regforcubon

The Pacific Skyline Council's Refund Policy: Deposits, if applicable for an activity, are non-refundable but transferable. With a written request, full refunds may be given for payments made toward an activity, up to one month prior to the event. After that, refunds are not given except in the case of a valid medical emergency with written documentation.

Getting There

Drive to Cub-ON via google: bit.ly/drivetocubon Cutter Scout Reservation is in the Santa Cruz Mountains and easily accessible from points throughout the Bay Area. A map to camp is included in this Leaders' Guide. ***Please do not rely on automobile navigation systems as GPS markers may be unreliable. Directions and general map available on pages***

Campsites

Scouts and their families are grouped by pack and assigned to campsites based on availability and the total size of their contingent. Most campsites are equipped with shelters, all are equipped with fire rings, potable water and latrines (pit toilets).

Fire Safety

View video on the proper steps for fire starting and extinguishing your campfire, <http://bit.ly/cubonfire>

Please bring your own firewood. Only small fuel for tinder and kindling may be picked up off the ground. ***Do not chop down or break branches off trees.***

Before you leave your site unattended at all, you will need to put out you fire completely. This means cool to touch. Please see above link for fire safety video

Additional

If you choose to prepare your own meals at campsites, please notify the Camp Director/Kitchen Director so they can plan accordingly. Be careful with your food, securing it from animals and thoroughly cleaning the areas making sure to avoid the accumulation of food scraps near camp (especially where dishes are washed).

Pack your camp's trash before you leave, and throw away into the dumpster located at Harkson Lodge.

We can eliminate a large portion of waste if attendees use reusable bottles/cups.

ALCOHOL, TOBACCO OR DRUGS SEE PAGE 9 FOR FULL TEXT RELATED TO THESE ITEMS

Arrival & Check in

PARKING

Due to the season of heavy rain, and ongoing concern about the sustainability of our roads, we have added measures to prevent overuse of our camp roads. **BACK IN PARKING ONLY DO NOT BLOCK OTHER VEHICLES IN. PARKING IS PERMITTED IN THE UPPER PARKING LOT NEAR THE HARKSON LODGE and Campsites East of the Parade Ground.** See map on page 15 for parking allowed in campsites. Your vehicle must remain in place in your campsite until your Sunday departure. If you need to leave at any time prior to Sunday for any reason you must park at the Harkson Lodge. **The only exception to any of these rules is in the event of an emergency.**

Check in

Friday: 6:00 pm on Friday until midnight at the Harkson Lodge. Park in the main parking lot, or assigned campsite, and walk to the Harkson Lodge.

Saturday: 7:00 am-9:20am at the Harkson Lodge and 10am-12pm at the TSB (Troop Service Building) or the Trading Post at the TSB. Park at the main parking lot or campsite and walk down to the TSB.

You will be given your campsite assignment the Thursday prior to arrival. Each parent must sign up for one kitchen shift, and one activity shift this helps keep the cost of Cub-ON down. A wrist band, identifying you as a camp attendee will also be issued at that time, and **must be worn by all campers throughout the weekend.**

BSA Medical Record

A BSA Medical Record (Parts A and B) is required for every camper. The Medical Record should be turned in at check-in. The forms will be returned upon departure. If the forms are not picked up, then they will be destroyed after the event.

If you need to leave camp to run into town, go to a sport event, etc. please sign the check in/out log. Before you go home before 10am on Sunday please check out with Camp Director.

Event & Activity Overview and Rules

Cub-ON (Cub-Over Nighter) is a weekend family camping event for all Cub Scouts and their families at **Cutter Scout Reservation**. Program areas are open throughout the weekend, and Scouts and their families can participate on a drop-in basis.

The Ranges for Shooting Sports

Cub Scouts can participate in a variety of Shooting Sports, including Archery and BB Gun Shooting. All ranges are supervised by BSA-certified Rangemasters. Per California Law we are requiring that a Shooting sports permission form



The Waterfront

Canoeing and Kayaking are available from our dock on Lake Gamlen. All Scouts and parents are required to wear personal flotation devices (PFDs). Please keep your mobile phone in a Ziploc or waterproof case, people do fall out of the boats.

Fishing (Catch & Release only) is available from the lake shore. Fishing poles and bait are sold at the Trading Post, campers are also encouraged to bring their own equipment. Can you catch the Cutter Bass?

Swimming is offered at the pool, weather, and trained staff permitting! **Leaders and parents should identify themselves to our Camp Staff if they hold a BSA or Red Cross lifeguard certification.**

The Craft Lodge

Arts & Crafts – examples vary between: Painting, Leathercraft, Woodworking, Pumpkin Carving (October Cub-ONs) and more are available in the Craft Lodge next to Lake Gamlen.

Other Activities and Special Programs

Other activities include Hiking, Whittling Chip instruction, and a Saturday Night Campfire program. Special programs include:

- The Bobcat Trail – NEW Scouts can earn their **BOBCAT** badge in ONE day!
- Whittling Chip-Knife safety
- BB gun and Archery (shooting sports awards can be earned)
- “Haunted Camp” & Pumpkin Carving (October)
- Aquatics that fulfill Aquatic Adventures at every cub rank.
- **Campfire**
- Campfires are great friendship, fellowship, and Scout Spirit builders. We invite all of our packs to join in the fun by performing their favorite skit, stunt, or song during our Campfire program on Saturday night. Please check with our camp staff for additional information.
- Scout’s Own

Cracker Barrel and the BIG Giveaway

After our Saturday Campfire, campers are welcomed back to the Harkson Lodge for homemade sweets, courtesy of our Kitchen Director, Bob Marozine. Bob first came to Cutter as a Scout in the early ‘70s, and has never left!

Cracker Barrel (krak-er-bar-uh): *adj.*; suggestive of the friendly homespun character of a country store - “a cracker–barrel philosopher.”
Noun,; in Scouting Cracker Barrel usually denotes desserts and fellowship

At Cracker Barrel, our camp staff hosts “the BIG Giveaway” –Campers will receive one ticket each at Cracker Barrel and in addition will receive one ticket for every \$5.00 that they spend in the Trading Post.

General

Do not enter areas marked as “STAFF ONLY”. Only the Camp Director can authorize individuals otherwise.

Parking

BACK IN PARKING ONLY. PARKING IS PERMITTED IN THE UPPER PARKING LOT NEAR THE HARKSON LODGE and Campsites East of the Parade Ground. See map on page 15 for parking allowed in campsites. Your vehicle must remain in your campsite until your Sunday departure. Due to the season of heavy rain, and ongoing concern about the sustainability of our roads, we have added measures to prevent overuse of our camp roads. If you need to leave at any time prior to Sunday for any reason you must park at the Harkson Lodge. **The only exception to any of these rules is in the event of an emergency.**

ALL CARS MUST BACK INTO SPACES TO ALLOW FOR EASIER EXIT IN CASE OF EMERGENCY. DO NOT BLOCK ANY OTHER CARS IN.

Meals

All meals are freshly prepared and served in the Harkson Lodge, starting with dinner on Friday and ending with lunch on Sunday. Meals are healthy and hearty, and designed to accommodate most diets. There is adequate storage space if you find it necessary to bring your own food (gluten-free, soy-free, etc.) If you have questions regarding our menus, please do not hesitate to contact the Council office at 650.341.5633. You are welcome to bring your own snacks and store them in your campsite; please make sure that they are secured and not stored in a manner that allows access for animals.

Allergies

We take food allergies seriously. If you have an allergy such as nut allergies, let the Camp Director know at least one week prior to arrival. We will then be able to plan food accordingly, i.e. nut free dining hall (as needed).

Showers and Toilets

There are showers located in the Pool area. Flush toilets are in the Pool area and in the Harkson Lodge. All campsites are equipped with latrines (pit toilets) and hand washing stations with drinkable water and with soap.

Medicine

Prescription medications should be secured and stored in campsites and administered by a parent or guardian. Please talk to the camp staff if you have any other medical concerns. If you are taking prescription medications with the potential of impairing any functioning or judgment, you will not engage in activities that would put Scouts at risk, including driving or operating equipment.

First Aid

There is a First Aid Station located in the Troop Service Building (TSB) and numerous First Aid kits located around camp. **Should you need medical assistance notify the Camp Director on site. Leaders, Parents, and Guardians should identify themselves to Camp Staff if they have medical training.**

Patches

Each youth participant will receive a commemorative Cub-ON patch for attending!

There are three different patch designs each year (Spring, Summer and Fall) – collect all three!

Each Cub-ON, a patch design contest (for Cub Scouts and siblings only) is held to help design next year's patch. Winners receive one free Cub-ON for themselves and one parent!



Departure

You may leave camp based on your personal schedule. Please notify the camp staff if you are leaving prior to Sunday breakfast or lunch so that we may plan meals accordingly. Patches will be given to your unit leader for distribution. If you need to leave camp to run into town, go to a sport event, etc. please sign the check in/out log. Before you go home before 10am on Sunday please check out with Camp Director.

Trash clean up

Pack your camp's trash and throw it away in the dumpster located at Harkson Lodge prior to your departure. Thank you!

Did YOU Forget Something?

The Camp Trading Post is located in the Troop Service Building and sells snacks, drinks, t-shirts, souvenirs, crafts, outdoor supplies, toiletries, and other miscellaneous items. You'll receive a BIG Giveaway raffle ticket for every \$5.00 that you spend! Most families usually spend \$30-\$50 in the trading post. Cash is preferred, check and credit card accepted

Alcohol, Tobacco, and Drugs Policy

Alcohol

The following statement was approved by the National Executive Board of the Boy Scouts of America:

It is the policy of the Boy Scouts of America that the use of alcoholic beverages and controlled substances is not permitted at encampments or activities on property owned and/or operated by the Boy Scouts of America, or at any activity involving participation of youth members.

Tobacco/Vaping/E-cigarettes

Adult leaders should support the attitude that they, as well as youths, are better off without tobacco or smoking in any form and may not allow the use of tobacco products at any BSA activity involving youth participants.

All Scouting functions, meetings, and activities should be conducted on a smoke-free basis, with smoking areas located away from all participants.

Drugs

As outlined in the Scouter Code of Conduct, Scouting activities are not a place to possess, distribute, transport, consume, or use any of the following items prohibited by law or in violation of any Scouting rules, regulations, and policies: alcoholic beverages or controlled substances, including marijuana.

In addition, the Code of Conduct specifies that if you are taking prescription medications with the potential of impairing any functioning or judgment, you will not engage in activities that would put Scouts at risk, including driving or operating equipment.

Medical & Recreational Marijuana

It is unacceptable for anyone to use or be under the influence of medical marijuana at or during any Scouting activity, or property.

(Excerpt from *The Guide to Safe Scouting*, No. 34416, 2013 Printing)

Part A: Informed Consent, Release Agreement, and Authorization

Full name: _____

DOB: _____

High-adventure base participants: Expedition/crew No.: _____ or staff position: _____
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Informed Consent, Release Agreement, and Authorization

I understand that participation in Scouting activities involves the risk of personal injury, including death, due to the physical, mental, and emotional challenges in the activities offered. Information about those activities may be obtained from the venue, activity coordinators, or your local council. I also understand that participation in these activities is entirely voluntary and requires participants to follow instructions and abide by all applicable rules and the standards of conduct.

In case of an emergency involving me or my child, I understand that efforts will be made to contact the individual listed as the emergency contact person by the medical provider and/or adult leader. In the event that this person cannot be reached, permission is hereby given to the medical provider selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for me or my child. Medical providers are authorized to disclose protected health information to the adult in charge, camp medical staff, camp management, and/or any physician or health-care provider involved in providing medical care to the participant. Protected Health Information/Confidential Health Information (PHI/CHI) under the Standards for Privacy of Individually Identifiable Health Information, 45 C.F.R. §§160.103, 164.501, etc. seq., as amended from time to time, includes examination findings, test results, and treatment provided for purposes of medical evaluation of the participant, follow-up and communication with the participant's parents or guardian, and/or determination of the participant's ability to continue in the program activities.

(If applicable) I have carefully considered the risk involved and hereby give my informed consent for my child to participate in all activities offered in the program. I further authorize the sharing of the information on this form with any BSA volunteers or professionals who need to know of medical conditions that may require special consideration in conducting Scouting activities.

With appreciation of the dangers and risks associated with programs and activities, on my own behalf and/or on behalf of my child, I hereby fully and completely release and waive any and all claims for personal injury, death, or loss that may arise against the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with any program or activity.

I also hereby assign and grant to the local council and the Boy Scouts of America, as well as their authorized representatives, the right and permission to use and publish the photographs/film/videotapes/electronic representations and/or sound recordings made of me or my child at all Scouting activities, and I hereby release the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity from any and all liability from such use and publication. I further authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage, and/or distribution of said photographs/film/videotapes/electronic representations and/or sound recordings without limitation at the discretion of the BSA, and I specifically waive any right to any compensation I may have for any of the foregoing.



NOTE: Due to the nature of programs and activities, the Boy Scouts of America and local councils cannot continually monitor compliance of program participants or any limitations imposed upon them by parents or medical providers. However, so that leaders can be as familiar as possible with any limitations, list any restrictions imposed on a child participant in connection with programs or activities below.



List participant restrictions, if any: None

I understand that, if any information I/we have provided is found to be inaccurate, it may limit and/or eliminate the opportunity for participation in any event or activity. If I am participating at Philmont, Philmont Training Center, Northern Tier, Florida Sea Base, or the Summit Bechtel Reserve, I have also read and understand the supplemental risk advisories, including height and weight requirements and restrictions, and understand that the participant will not be allowed to participate in applicable high-adventure programs if those requirements are not met. The participant has permission to engage in all high-adventure activities described, except as specifically noted by me or the health-care provider. If the participant is under the age of 18, a parent or guardian's signature is required.

Participant's signature: _____ Date: _____

Parent/guardian signature for youth: _____ Date: _____

(If participant is under the age of 18)

Second parent/guardian signature for youth: _____ Date: _____

(If required; for example, California)

Complete this section for youth participants only:

Adults Authorized to Take to and From Events:

You must designate at least one adult. Please include a telephone number.

Name: _____

Name: _____

Telephone: _____

Telephone: _____

Adults NOT Authorized to Take Youth To and From Events:

Name: _____

Name: _____

Telephone: _____

Telephone: _____





BOY SCOUTS OF AMERICA®

CALIFORNIA RIFLE AND SHOTGUN PARENTAL/LEGAL GUARDIAN PERMISSION FORM

I, _____, parent or legal guardian of _____,
(Print Name of Parent or Legal Guardian) (Print Name of Child)

hereby give my child express permission and consent to be loaned and possess firearms (handguns and long guns) and ammunition to engage in lawful, recreational sport, including target practice, and/or a course of instruction in the safe and lawful use of a handgun. (Cal. Penal Code §§ 27945, 29610, 29615, 29650, 29655; 18 U.S.C § 922(x)). As used in this form, "firearms" include any handguns, long guns, or shotguns that may lawfully loaned to and possessed by a minor under state and federal law.

I also give my child express permission and consent to possess, and for a person to loan to my child, a "BB device" as defined in Cal. Penal Code * 16250. (Cal. Penal Code § 19915).

This consent is valid, absent my express revocation thereof, for the calendar year of _____.
(Calendar Year)

A photocopy or facsimile of this written consent will serve as an original.

I represent that I am (1) the parent or legal guardian of the minor named above and (2) not prohibited by Federal, state, or local law from possessing a firearm. I agree to indemnify and hold harmless the Boy Scouts of America, and any local Council and all officers, members, employees, and volunteers thereof, from all losses, damages, causes of action, cost and expenses, arising from any false statements or representations made by me herein.

Please bring at least two (2) copies of this form to camp with your child. One (1) copy must remain in your child's possession at all times while he or she possesses any firearms or ammunition, and one (1) copy should be provided to the Camp Director.

Unit #: _____
Last Name: _____
First Name: _____

Signature of Parent or Legal Guardian

Date

Part B: General Information/Health History

Full name: _____

DOB: _____

High-adventure base participants: Expedition/crew No.: _____ or staff position: _____
--

Age: _____ Gender: _____ Height (inches): _____ Weight (lbs.): _____

Address: _____

City: _____ State: _____ ZIP code: _____ Telephone: _____

Unit leader: _____ Mobile phone: _____

Council Name/No.: _____ Unit No.: _____

Health/Accident Insurance Company: _____ Policy No.: _____

!	Please attach a photocopy of both sides of the insurance card. If you do not have medical insurance, enter "none" above.	!
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In case of emergency, notify the person below:

Name: _____ Relationship: _____

Address: _____ Home phone: _____ Other phone: _____

Alternate contact name: _____ Alternate's phone: _____

Health History

Do you currently have or have you ever been treated for any of the following?

Yes	No	Condition	Explain
<input type="checkbox"/>	<input type="checkbox"/>	Diabetes	Last HbA1c percentage and date:
<input type="checkbox"/>	<input type="checkbox"/>	Hypertension (high blood pressure)	
<input type="checkbox"/>	<input type="checkbox"/>	Adult or congenital heart disease/heart attack/chest pain (angina)/heart murmur/coronary artery disease. Any heart surgery or procedure. Explain all "yes" answers.	
<input type="checkbox"/>	<input type="checkbox"/>	Family history of heart disease or any sudden heart-related death of a family member before age 50.	
<input type="checkbox"/>	<input type="checkbox"/>	Stroke/TIA	
<input type="checkbox"/>	<input type="checkbox"/>	Asthma	Last attack date:
<input type="checkbox"/>	<input type="checkbox"/>	Lung/respiratory disease	
<input type="checkbox"/>	<input type="checkbox"/>	COPD	
<input type="checkbox"/>	<input type="checkbox"/>	Ear/eyes/nose/sinus problems	
<input type="checkbox"/>	<input type="checkbox"/>	Muscular/skeletal condition/muscle or bone issues	
<input type="checkbox"/>	<input type="checkbox"/>	Head injury/concussion	
<input type="checkbox"/>	<input type="checkbox"/>	Altitude sickness	
<input type="checkbox"/>	<input type="checkbox"/>	Psychiatric/psychological or emotional difficulties	
<input type="checkbox"/>	<input type="checkbox"/>	Behavioral/neurological disorders	
<input type="checkbox"/>	<input type="checkbox"/>	Blood disorders/sickle cell disease	
<input type="checkbox"/>	<input type="checkbox"/>	Fainting spells and dizziness	
<input type="checkbox"/>	<input type="checkbox"/>	Kidney disease	
<input type="checkbox"/>	<input type="checkbox"/>	Seizures	Last seizure date:
<input type="checkbox"/>	<input type="checkbox"/>	Abdominal/stomach/digestive problems	
<input type="checkbox"/>	<input type="checkbox"/>	Thyroid disease	
<input type="checkbox"/>	<input type="checkbox"/>	Excessive fatigue	
<input type="checkbox"/>	<input type="checkbox"/>	Obstructive sleep apnea/sleep disorders	CPAP: Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	List all surgeries and hospitalizations	Last surgery date:
<input type="checkbox"/>	<input type="checkbox"/>	List any other medical conditions not covered above	

Part B: General Information/Health History

Full name: _____
 DOB: _____

High-adventure base participants:
 Expedition/crew No.: _____
 or staff position: _____

Allergies/Medications

Are you allergic to or do you have any adverse reaction to any of the following?

Yes	No	Allergies or Reactions	Explain	Yes	No	Allergies or Reactions	Explain
<input type="checkbox"/>	<input type="checkbox"/>	Medication		<input type="checkbox"/>	<input type="checkbox"/>	Plants	
<input type="checkbox"/>	<input type="checkbox"/>	Food		<input type="checkbox"/>	<input type="checkbox"/>	Insect bites/stings	

List all medications currently used, including any over-the-counter medications.

CHECK HERE IF NO MEDICATIONS ARE ROUTINELY TAKEN. IF ADDITIONAL SPACE IS NEEDED, PLEASE INDICATE ON A SEPARATE SHEET AND ATTACH.

Medication	Dose	Frequency	Reason

YES NO Non-prescription medication administration is authorized with these exceptions: _____

Administration of the above medications is approved for youth by: _____

Parent/guardian signature

MD/DO, NP, or PA signature (if your state requires signature)

! Bring enough medications in sufficient quantities and in the original containers. Make sure that they are NOT expired, including inhalers and EpiPens. You SHOULD NOT STOP taking any maintenance medication unless instructed to do so by your doctor. **!**

Immunization

The following immunizations are recommended by the BSA. Tetanus immunization is required and must have been received within the last 10 years. If you had the disease, check the disease column and list the date. If immunized, check yes and provide the year received.

Yes	No	Had Disease	Immunization	Date(s)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tetanus	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pertussis	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Diphtheria	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Measles/mumps/rubella	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Polio	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Chicken Pox	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hepatitis A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hepatitis B	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meningitis	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Influenza	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other (i.e., HIB)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exemption to immunizations (form required)	

Please list any additional information about your medical history:

DO NOT WRITE IN THIS BOX
 Review for camp or special activity.

Reviewed by: _____

Date: _____

Further approval required: Yes No

Reason: _____

Approved by: _____

Date: _____

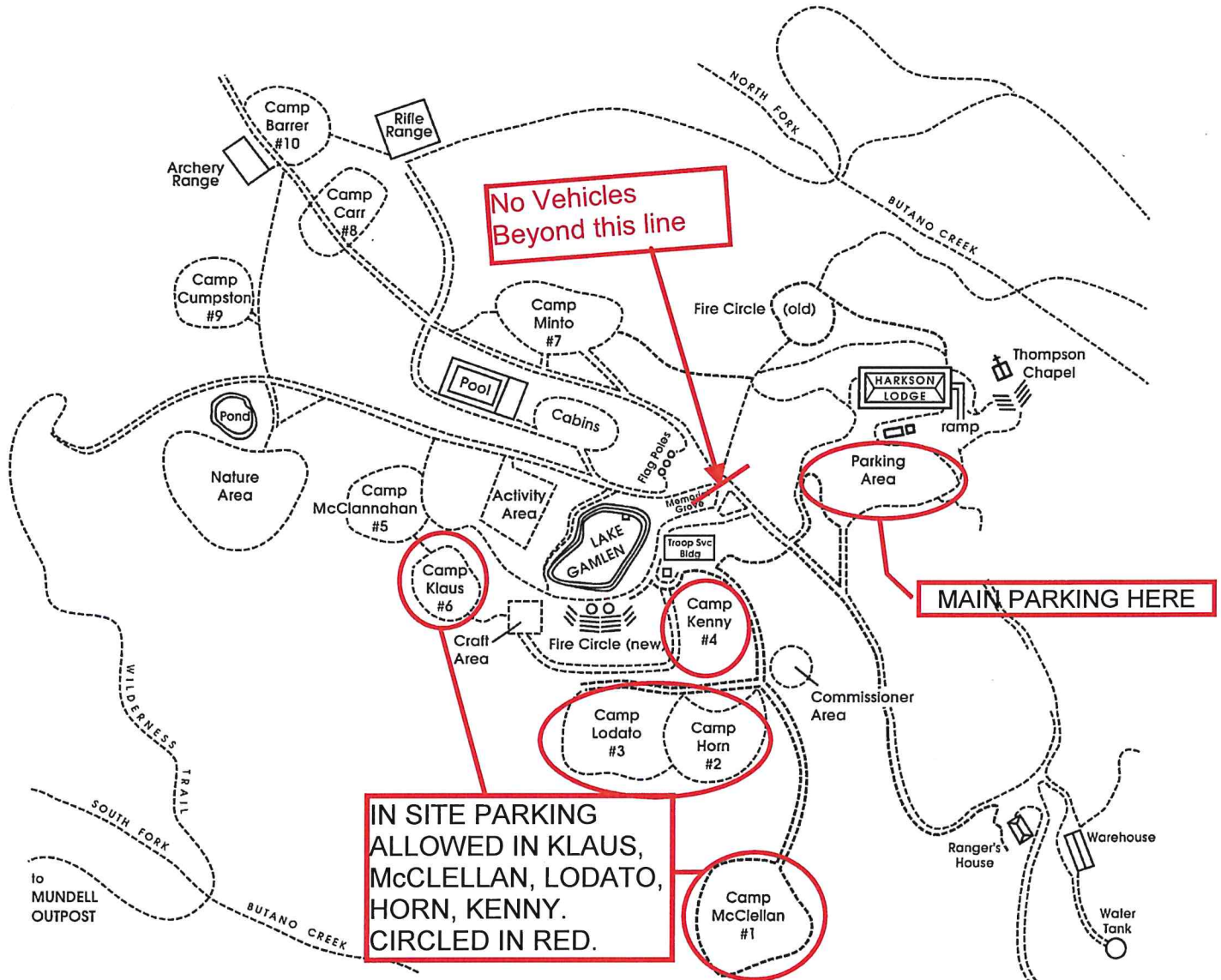


CAMP SITES

- | | |
|---------------------|------------------|
| #1 Camp McClellan | #6 Camp Klaus |
| #2 Camp Horn | #7 Camp Minto |
| #3 Camp Lodato | #8 Camp Carr |
| #4 Camp Kenny | #9 Camp Cumpston |
| #5 Camp McClannahan | #10 Camp Barrer |

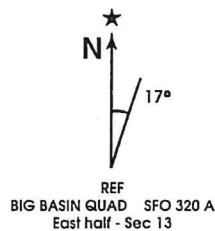
TRADING POST

The Trading Post is located in the Troop Service Building (next to the lake)



CUTTER SCOUT RESERVATION

Pacific Skyline Council
 Boy Scouts of America



TO CHINA GRADE
 236 JUNCTION
 (4.1 miles)

WOOD GATE

Activity Schedule



(Not All Areas May be Open Due to Supervisory Availability)

Friday

6:00 pm-11:59pm	Check-in Starts	Harkson Lodge
7:45 pm-8:30 (app)	Dinner	Harkson Lodge
9:30 pm	TAPS – Quiet and Lights Out!	

Saturday

7:00 am-12pm	Check-In	TSB (Troop Service Building)
7:30 am	Reveille	Harkson Lodge
8:00 am-9am	Breakfast	Parade Grounds
9:30 am-9:45am	Opening Flag Ceremony	
10:00 am-12pm	Program Areas Open	
12:00 pm-1pm	Lunch	Harkson Lodge
1:30 pm- 5pm	Program Areas Open	
6:00 pm-7pm	Dinner	Harkson Lodge
7:30pm-8pm	Fire Building & Safety	Fire Circle (new)
8:00 pm (app.)-8:45pm (app)	Evening Campfire	Fire Circle (new)
8:55 pm-9:30pm (app.)	Cracker Barrel & Big Giveaway	Harkson Lodge
9:45 pm	TAPS – Quiet and Lights Out!	

Sunday

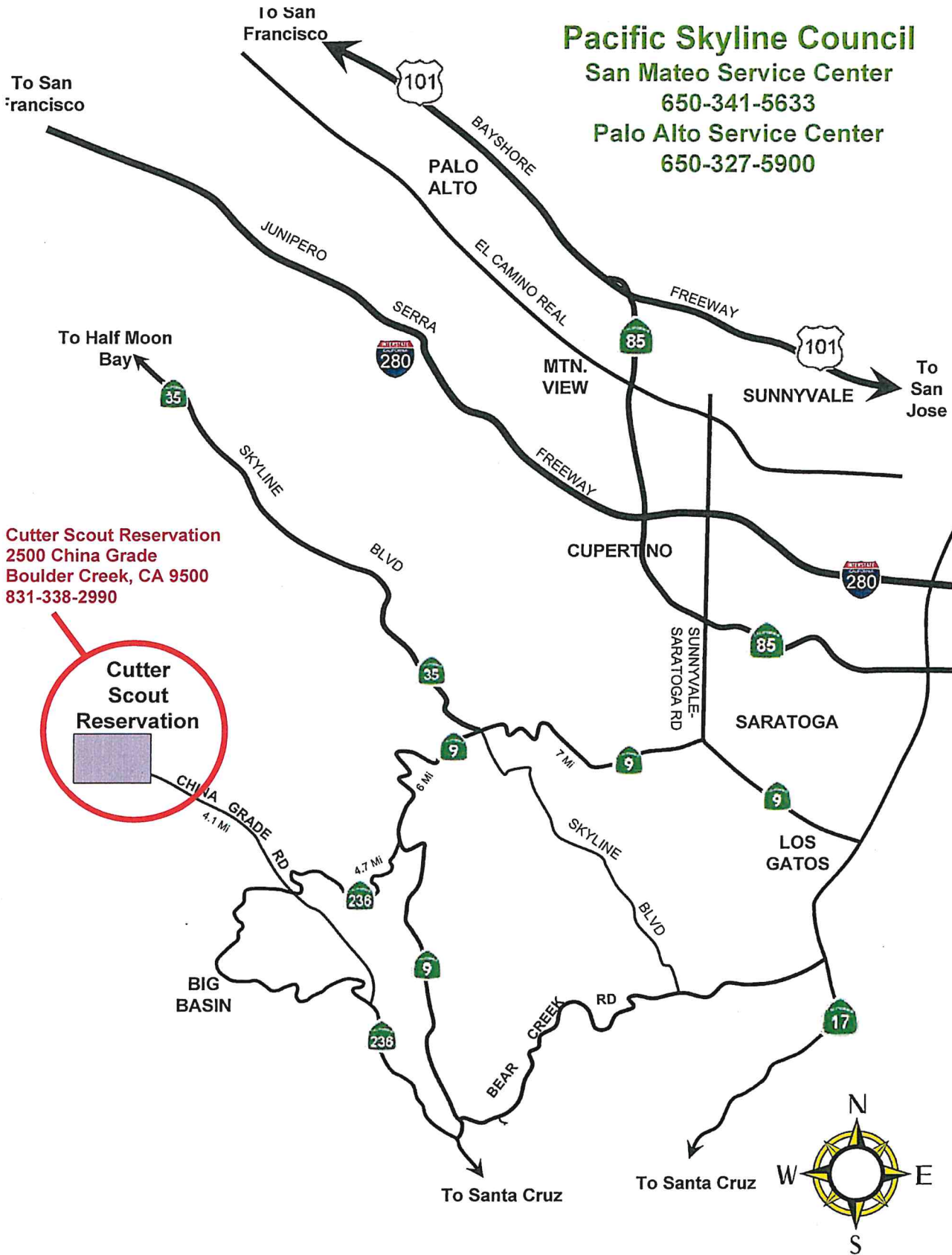
7:30 am	Reveille	
8:00 am	Breakfast	Harkson Lodge
9:30 am	Scouts' Own (Interfaith Service)	Thompson Chapel
10:00 am-11am	Program Areas Open	
11:30 am	Lunch (Take Away)	Harkson Lodge

Thank you all for your help to make Cub-ON successful!

See the **White Board in the Harkson Lodge** or listen to announcements at meal times regarding the following special programs:

- The Bobcat Trail
- Whittlin' Chip
- Haunted Camp (Fall Only)
- Spirit of the Arrow (tentative)
- Nature Hike
- Cub Adventure Classes
- Adult Training Classes (usually October for BALOO training)

Pacific Skyline Council
San Mateo Service Center
650-341-5633
Palo Alto Service Center
650-327-5900



Directions to Cutter Scout Reservation

2500 China Grade Rd., Boulder Creek, CA 95006

It is suggested to print driving instructions from Google or other map service. GPS has been known to cut out for some folks traveling to camp.

<http://bit.ly/drivetocubon> for a quick link for google maps

From the Town of Saratoga:

Take SR 9 westbound over Skyline Boulevard to the intersection with SR 236.

Continue straight on SR 236 towards Big Basin.

Turn right onto China Grade and follow it for 4 miles until the dirt road arrives at the Cutter Scout Reservation ranger's cabin.

Turn left and follow the signs to the Harkson Lodge parking lot.

Packing List / What to Bring

* = available in Foster City Scout Shop

Camping Equipment

- Family Tent*
- Sleeping Bag*
- Pillow*
- Sleeping Pad or Air Mattress*
- Flashlights / Head Lamps*
- Camp Lantern*
- Rope (paracord at Scout Shop)*
- Mess Kit (optional)*
- First Aid Kit*
- Wood (for campfire)
- Matches*
- Water Bottle*
- Ziploc bag or waterproof case for Phone (falling out of boat...)
- Reusable cup*

Clothing

- T-Shirts* (3) & Pants (2)
- Sweater or Sweatshirt* (1)
- Underwear (3)
- Jacket or Poncho* (1)
- Rain Gear*

- Sturdy Shoes/Sneakers
OPEN TOE SHOES/SANDALS NOT permitted in camp except the pool/shower area
- Socks* (3 pair)
- Swimsuit (May, June, Aug, October)
- Knit Cap*
- Baseball Hat*
- Uniform* (optional – check w/your Leader)

Toiletries

- Toothbrush*
- Toothpaste*
- Soap
- Sun Block*
- Bug Repellent*
- Personal Medications
- Towel*
- Medical Forms for Youth & Adult Participants Parts A&B

Did YOU Forget Something?

The Camp Trading Post is in the Troop Service Building and sells snacks, drinks, t-shirts, souvenirs, crafts, outdoor supplies, toiletries, and other miscellaneous items. You'll receive a BIG Giveaway raffle ticket for every \$5.00 that you spend! Most families usually spend \$30-\$50 in the trading post. Cash is preferred, check and credit card accepted

The weather in camp is temperate year-round, but conditions can change quickly. Campers should be prepared and pack accordingly. Bring clothes to layer, hats & gloves. Long-sleeved shirts and pants are preferred to protect against ticks, mosquitos, poison oak and other natural hazards.

Each campsite is equipped with a Latrine. There are flush toilets at the Harkson Lodge and in the Pool area. Showers are also located in the Pool area.

There is no cellular service in camp. Electricity is provided by generators. Potable well water is stored and treated for our use. In case of emergencies, there is a landline telephone located at the Ranger's house.

ADDITIONAL REMINDERS:

- PARKING AT MAIN PARKING LOT ONLY, UNLESS OTHERWISE INSTRUCTED BY CAMP STAFF.
- CHECK IN AT HARKSON LODGE UPON ARRIVAL.
- NO ALCOHOL, NO TOBACCO, NO DRUGS, NO RECREATION OR MEDICAL MARIJUANA PERMITTED.
- NO OPEN TOES SHOES/SANDALS in camp except in pool/shower areas
- CONTACT THE CAMP DIRECTOR FOR ANY EMERGENCIES 24-7.
- The Camp Director's sleeping quarters are located under Harkson Lodge Dining Hall, LABELED "DIRECTOR'S CABIN"