



# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

December 18th, 2017



12/19/17– Troop holiday party– Pot-Luck

12/26/17– No Meeting

1/2/18– PLC Meeting

1/9/17– Court of Honor!!!

1/16/17– Patrol Meeting  
Class B

1/19/17-1/21/17– Oklawaha Campout  
(the Cub Scouts are coming!)

1/23/17– Troop Meeting  
Class A

1/30/17– No Meeting

2/6/18– PLC Meeting

2/13/18– Troop Meeting  
Class A

2/20/18– Patrol Meeting  
Class B

2/27/19– Troop Meeting

The Material does not matter to those who matter.

What do you get when you cross a dog with a cell

Answer: A golden retriever.



In This Issue

- Crossword answers
- Lake Kissimmee Pictures

# Lake Kissimmee Campout Pictures



# Crossword Answers

1	B	U	2	C	K	3	S		4	B	U	5	F	F	6	A	L	7	O
	O		L		E				E		R				L			N	
8	O	9	R	E	I	D	10	A		11	Y	E	L	L	12	O	W		
13	N	E	V			14	G	P	A			N			16	O	N	A	
17	E	V	E	R	E	T	T				C				18	H	E	R	
			L						L		H				A			D	
19	A	L	A	B	A	M	A			21	C	A	K	22	E	S			
	U		N		N			23	N	24	O	R						G	
25	B	A	D	26	E	N			27	T	R	E	N	28	T	O	29	N	
	U			V			30	R	A	T	E				E			O	
31	R	A	32	C	I	33	N	E				K		34	M	35	I	D	
	N			U		B			36	O	R				37	P	M		
			38	B	L	A	C	K						39	P	E	A	K	



# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

December 11th, 2017



Each December on National **Wreaths Across America** Day, our mission to Remember, Honor and Teach is carried out by coordinating **wreath**-laying ceremonies at Arlington National Cemetery, as well as over 1,200 additional locations in all 50 U.S. states, at sea, and abroad. (Wreaths Across America)

12/12/17– Patrol Meeting  
Class B

12/15/17-12/17/17– Lake Kissimmee  
Campout

12/16/17– Wreaths Across America

12/19/17– Troop holiday party– Pot-  
Luck

12/26/17– No Meeting

1/2/18– PLC Meeting

1/9/17– Court of Honor!!!

1/16/17– Patrol Meeting  
Class B

1/19/17-1/21/17– Oklawaha Campout  
(the Cub Scouts are coming!)

1/23/17– Troop Meeting  
Class A

1/30/17– No Meeting

2/6/18– PLC Meeting

2/13/18– Troop Meeting  
Class A

2/20/18– Patrol Meeting

Why was the pig having trouble walking?

Answer: because it pulled its hamstring



## In This Issue

- Wreaths Across America Information
- 30th Annual Scouts Honor Golf Classic Wrapup
- Eagle Scout Project Pictures
- Camp Cooking Crossword answers

## 30th Annual Scouts Honor Golf Classic

The Scouts Honor Golf Classic raises funds that directly help offset expenses needed for the TK Reservation. This includes tents, canoes, pool maintenance, kitchen maintenance, and program supplies for the weeks of summer camp, as well as for activities throughout the year!

The scouts who participated are:

Blake Fearon T111

Nick Boekholder T215 & Crew 2296

Tyler Mistetta T155

McLean Morton T132 In the pic with the scouts is a former TN Titan & Philadelphia Eagle  
Jevon Kearsae.

OLD PALM GOLF CLUB		
Monday, December 16, 2013		
LARRY BROWN MIKE ACHARYA	PETER HUNT DAVE BRANSON	57
NICK BOEKHOLDER TYLER MISTETTA	BLAKE FEARON MCLEAN MORTON	67
ZACH MCELROY JEVON KEARSE	PETER FARMER RYAN CROWLEY	59
DANIEL KAHAN HAROLD SMITH	ION MOORE BLAKE JOHNSON	58
BRIAN MACIAR TOM BABEL	NICK O'HARA DANNY LOFTUS	59
ELVIN MANGES JAKE MANGES	MAXWELL NELSON ROY FOSTER	71
Closest to the Hole #2		Closest to the Hole #11
Ryan Crowley 76		Peter Bernhardt 115
Closest Drive #17		Ryan Crowley



## Luc LaGrange's Eagle Project Wrapup

They say "teamwork makes the dream work." That couldn't have been more true when it came down to getting Luc's Eagle Scout Project completed. It was down to the wire with a last minute notification that the project was a go, just days before the scheduled build, and just look at the crew that showed up to pitch in. It truly speaks volumes about T111's sense of commitment to each other, and each other's success, that such a great turnout happened for this event. The benches turned out great and Luc did an awesome job of overcoming the obstacles that presented themselves that morning.



## Solution to the Last Newsletter's Crossword (cooking)



## Wreath's Across America

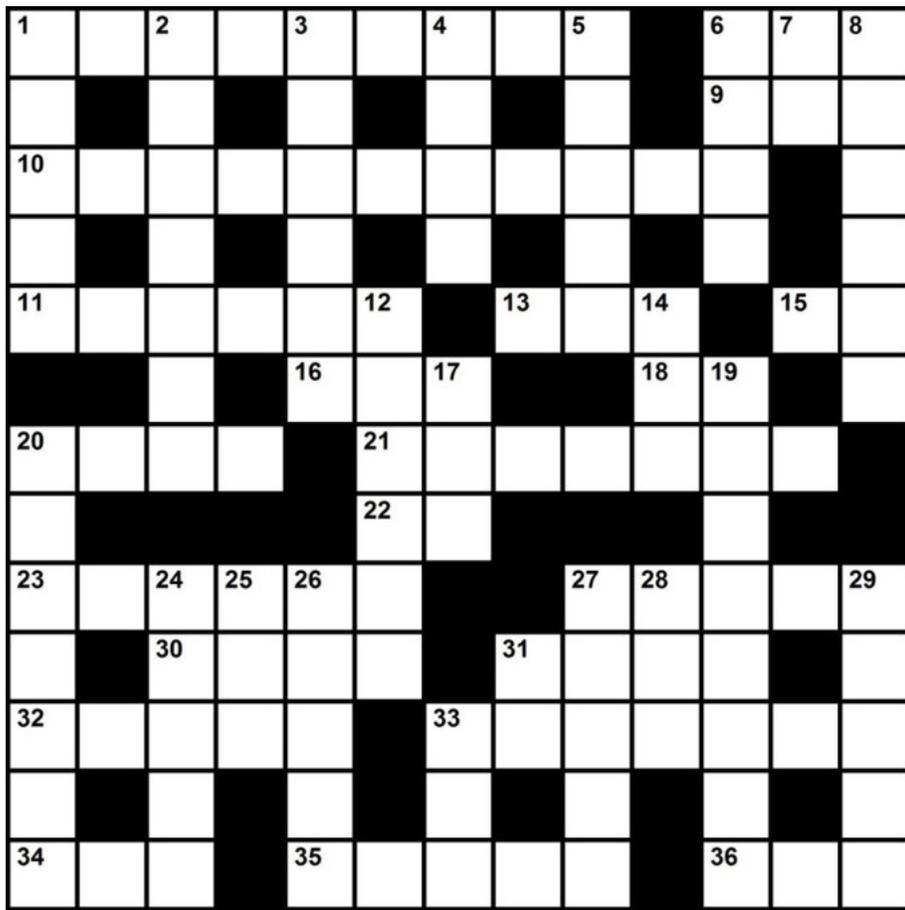
*"To be killed is not the worst that can happen. To be lost is not the worst that can happen...  
To be forgotten is the worst that can happen." - Pierre Claeysens (1909 - 2003)*

**Wreaths Across America**  
*Honoring our Veterans one wreath at a time since 1992*  
 Please join us for the laying of the wreaths on  
**December 16, 2017 - 11:30 A.M.**  
*South Florida National Cemetery - 6501 State Rd. 7, Lake Worth, Fl.*

Parking is always a bear! It is recommended that you try to get there earlier than 11:30 so that you can get parked and walk up. For the boys participating, I don't know what time everyone is going to try to meet, but you will want to be in your Class A uniform. This event is an annual council sponsored event which honors the fallen. Wreaths will be laid on the graves of our soldiers interned at the South Florida National Cemetery this Saturday morning. For those not going on the campout, we hope to see you at this event. Keep an eye on your email as we will aim to get a meet up time out to everyone. Good guestimate will be about an hour before the ceremony though.

Location: South Florida National Cemetery  
 6501 St Rd 7  
 Lake Worth, FL 33467

# BSA Council-themed Crossword



**Across**

- Former name of the Pennsylvania-based Washington Crossing Council; also a group of male deer
- 4. \_\_\_\_ Trail Council in Midland, Texas; named after a shaggy animal
- 8. Boise-based council; the name is a combination of two states
- 11. Camp Hugh Taylor Birch of the Tecumseh Council is in \_\_\_\_ Springs, Ohio; also a color
- 13. Home state of the Las Vegas Area Council, abbr.
- 14. A measure of a student's academic achievement (abbr.)
- 16. \_\_\_\_ roll (winning); two words
- 17. City where the Mount Baker Council is based
- 18. One of LBJ's beagles
- 19. Greater \_\_\_\_ Council, based in Vestavia Hills
- 21. Birthday treats
- 23. It goes with neither
- 25. One half of the name of the council based in Binghamton, N.Y., and an iconic figure in Scouting
- 27. New Jersey city served by the Washington Crossing Council
- 30. Assess the value of
- 31. City that is served by Milwaukee's Three Harbors Council

- 34. \_\_\_\_-America Council, based in Omaha, Neb.
- 36. The southernmost state that the Cascade Pacific Council serves, abbr.
- 37. Afternoon time
- 38. \_\_\_\_ Swamp Area Council in Ohio; also a color
- 39. Longs \_\_\_\_ Council in Colorado

**Down**

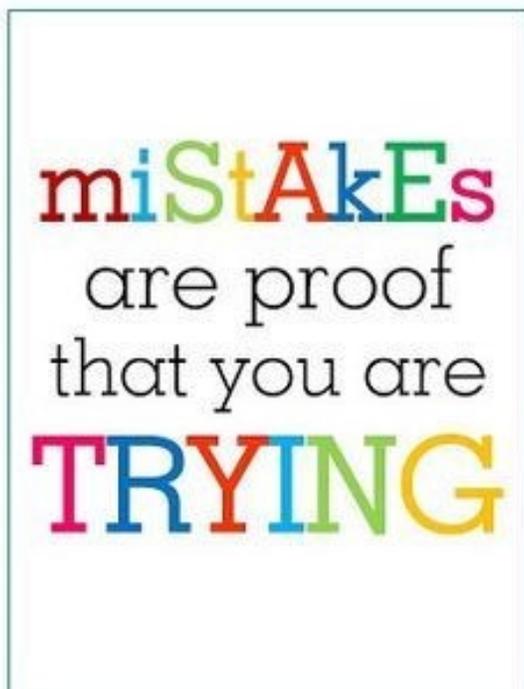
- 1. One half of the name of the council based in Asheville, N.C.; last name of an American pioneer
- 2. Greater \_\_\_\_\_ Council, based in Ohio
- 3. Bulrush, e.g.
- 4. " \_\_ Prepared"
- 5. Council serving northwest Pennsylvania; two words
- 6. Council based in Parkersburg, W.Va.
- 7. Forward
- 9. Minister's title, abbr.
- 10. Suitable
- 12. Four quarters
- 15. \_\_\_\_\_ Area Council; serves Cherokee, Cobb and Pickens counties in Ga.
- 19. City serviced by the Chattahoochee Council
- 20. New England's Cape \_\_\_\_
- 22. It can be a barrier to learning and partnership
- 24. Meal morsel
- 26. \_\_\_\_ Manning, an NFL quarterback
- 28. Arizona city located near Phoenix and served by the Grand Canyon Council
- 29. To approve quietly
- 30. Email subject line abbr.
- 32. Kind of Scout
- 33. Basketball organization
- 35. John Denver's "Thank God \_\_\_\_ Country Boy"; two words
- 36. The Last Frontier Council is based in this state (abbr.)



# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

November 27th, 2017



11/28/17– Troop Meeting  
Class A

12/2/17– Eagle Scout Project at Luc's  
House

12/5/17– PLC Meeting

12/12/17– Patrol Meeting  
Class B

12/15/17-12/17/17– Lake Kissimmee  
Campout

12/19/17– Troop Meeting  
Class A

12/26/17– Troop Meeting  
Class A

1/2/18– PLC Meeting

1/9/17– Troop Meeting  
Class A

1/16/17– Patrol Meeting  
Class B

1/19/17-1/21/17– Oklawaha Campout  
(the Cub Scouts are coming!)

1/23/17– Troop Meeting  
Class A

“Volunteers do not necessarily have the time; they  
have the heart.” Elizabeth Andrew

What does the snowman eat for breakfast?

Answer: Frosted Flakes

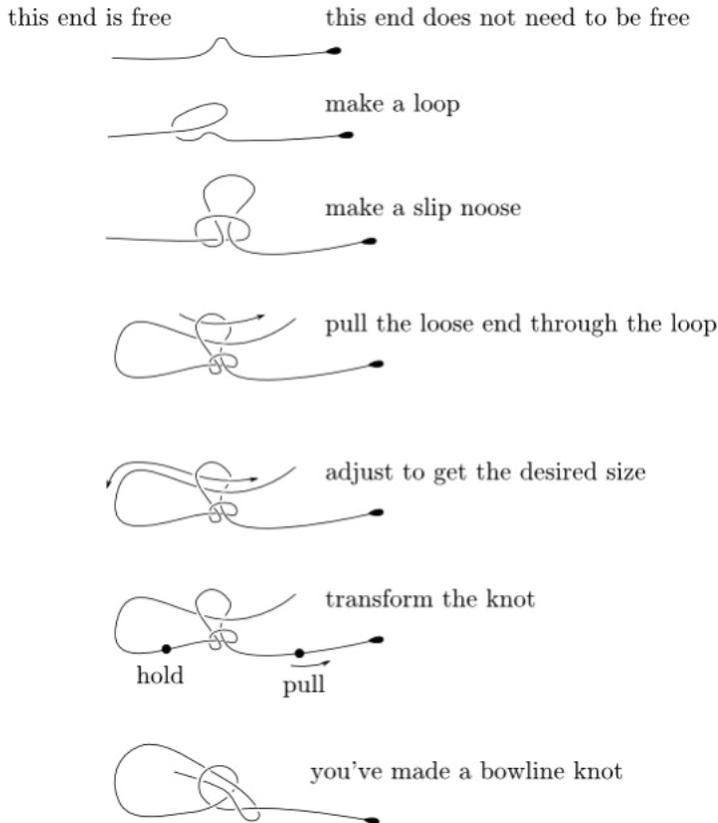


## In This Issue

- Not your average Knots
- Eagle Scout Project Information
- Merit Badge themed Crossword Puzzle answers
- Camp Cooking Crossword (answers in 2 weeks)

# Not your average Knots

There are a few knots out there that can make rescuing a buddy in the water or getting a dining fly up much easier and safer. These are a couple examples of useful knots you should have in your toolkit.

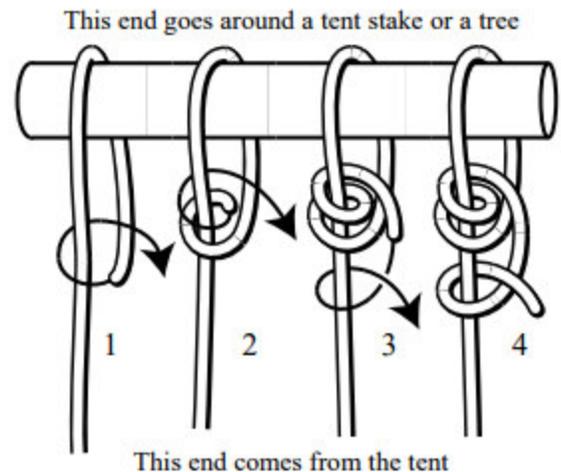


The bowline is used to make a loop at one end of a line. It is tied with the rope's working end also known as the "tail" or "end". ... As such, a person needing rescue could hold onto the rope with one hand and use the other to tie the knot around their waist before being pulled to safety by rescuers.

## Taut-line Hitch

The taut-line hitch is my least favorite of the six boy scout knots. It is used as an adjustable knot in tent guy lines and that's about all it is used for. This knot has to be internally tightened quite tight for it to work properly. Two half hitches works almost as well as this knot for tent guy lines and the trucker's knot works even better.

The taut-line hitch is an adjustable loop knot for use on lines under tension. It is useful when the length of a line will need to be periodically adjusted in order to maintain tension. It is made by tying a rolling hitch around the standing part after passing around an anchor object.



## Solution to Last Newsletter's Crossword



## Luc LaGrange's Eagle Scout Project

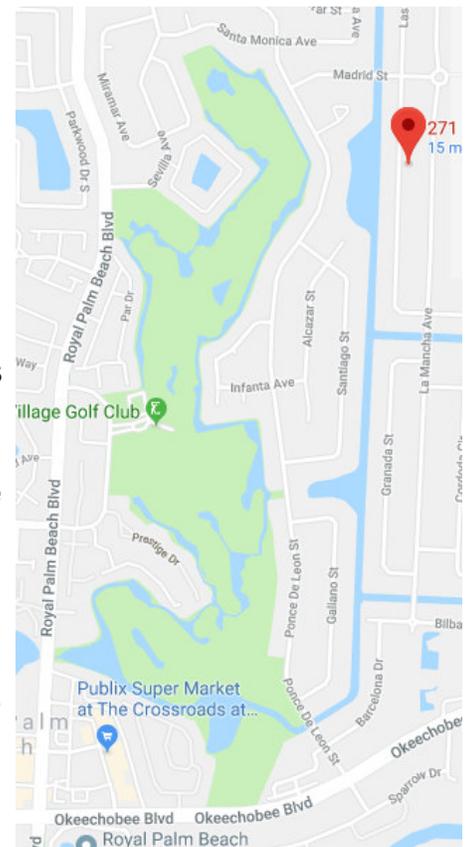


That's right; it's time!!!

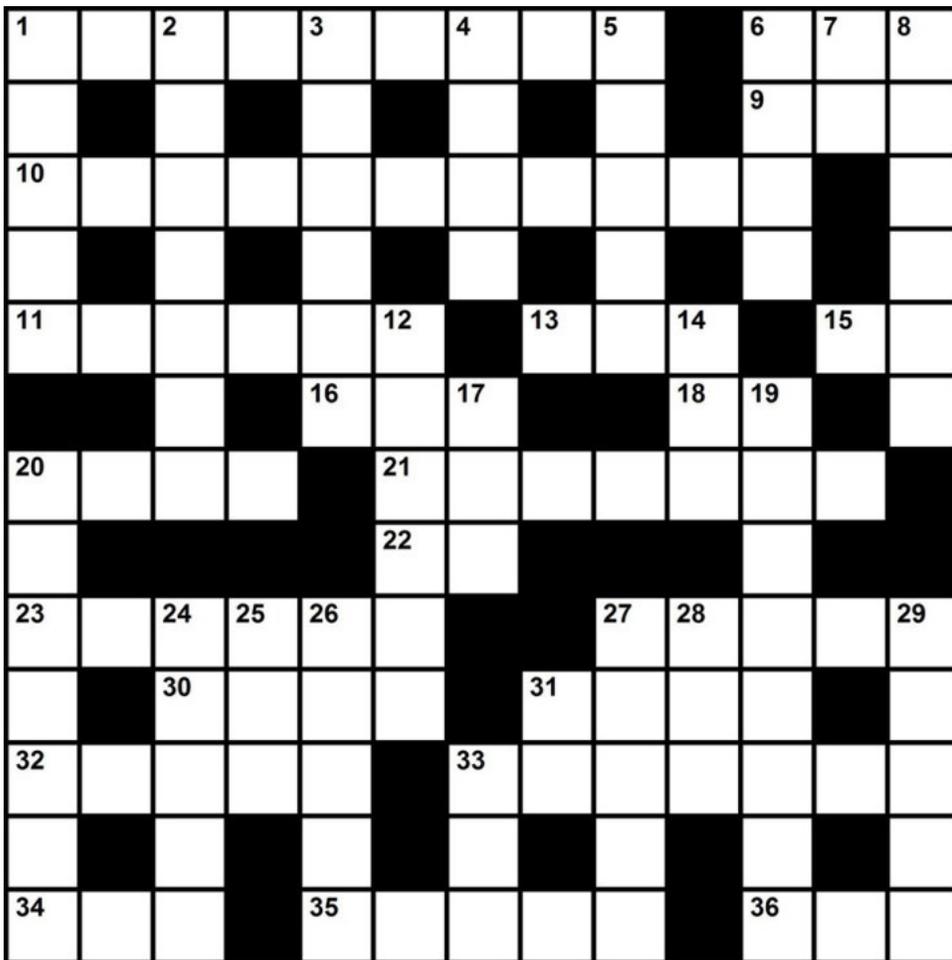
Hi Troop 111,

It's time to start the construction of my Eagle Project and I need everyone to come and help! We will be making benches for Big Dog Rescue Ranch. Please bring **work clothes, safety glasses, sunscreen, and a water bottle**. Even though it is the end of the year, Florida is always hot. I will be having the construction of the project at my house on **Saturday, December 2nd; the address is 271 Las Palmas Street. Please be there at 8:30 a.m.** LUNCH WILL BE PROVIDED! If anyone has a handheld sander that is willing to let me borrow it, please let me know as soon as possible. Thank you all and see you then!

-Lucien LaGrange



## Camp-Cooking Crossword



### Across

1. You cook with this over coals, two words
6. Tasty mixture to dunk into
9. Put \_\_\_ \_ good word for, two words
10. Classic construction toy made of notched wood, two words
11. A campfire dessert
13. Campfire residue
15. St. Paul's state
16. Put on clothes
18. Fruit drink, for short
20. Veal meat source
21. Latin dish often made at a campfire
22. Smoky Mountains state, abbr.
23. Fine to consume
27. They surround a Dutch oven
30. Steering rope
31. Washing substance
32. Sticks turned over a fire
33. Type of salmon
34. Hush!
35. It may be roja or verde
36. Unit of resistance

### Down

1. Flavored cucumbers
2. It's been superseded by aluminum wrap, two words
3. Sounded off, like an owl
4. Plant bearing grapes
5. Cozy corners
6. Campfire entree selection
7. Accepted
8. Kind of knife used to peel potatoes
12. Butter will \_\_\_\_\_ when left out
14. Boiling
17. One of the Bobbsey Twins
19. Hot red or green pepper
20. American and cheddar
24. Famous type of stew
25. Wager
26. Scouting chefs write them to prep a meal
27. Campfire drink
28. Symbolically strong tree
29. Rises from boiling water
31. Therefore
33. Sun, in Spanish



# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

November 13th, 2017

**“EVERY NEW SCOUT IS A BEACON  
OF HOPE IN AN INCREASINGLY  
CHALLENGING WORLD.”**

**-MIKE SURBAUGH,  
CHIEF SCOUT EXECUTIVE**

11/14/17– Troop Meeting  
Class A

11/21/17– Troop Meeting  
Class A

11/23/17– Thanksgiving Day

11/28/17– Troop Meeting  
Class A

12/5/17– PLC Meeting

12/12/17– Patrol Meeting  
Class B

12/15/17-12/17/17– Lake Kissimmee  
Campout

12/19/17– Troop Meeting  
Class A

12/26/17– Troop Meeting  
Class A

1/2/18– PLC Meeting

1/9/17– Troop Meeting  
Class A

**“The future belongs to those who prepare for it today.”**  
Malcolm X

Two atoms were walking down the sidewalk and suddenly one slips off the curb and says "Oh no, I've lost my electron!"  
The other atom says "Are you sure?"  
1st atom says "Yes, I'm positive!"



## In This Issue

- Mystery Campout Wrapup
- Merit Badge themed Crossword Puzzle  
(answers next week)

## Mystery Campout—Wrapup

This past weekend, 21 boys and 6 men departed Camp Davis as they have done so many times before. This time was different. Once per year, the boys head out for the annual Mystery Campout with no idea what they will be doing, nor where they will end up. There seemed to be an endless number of theories being tossed about. Would we end up at Camp Davis again, would we be going to TK, would we go to Disney?

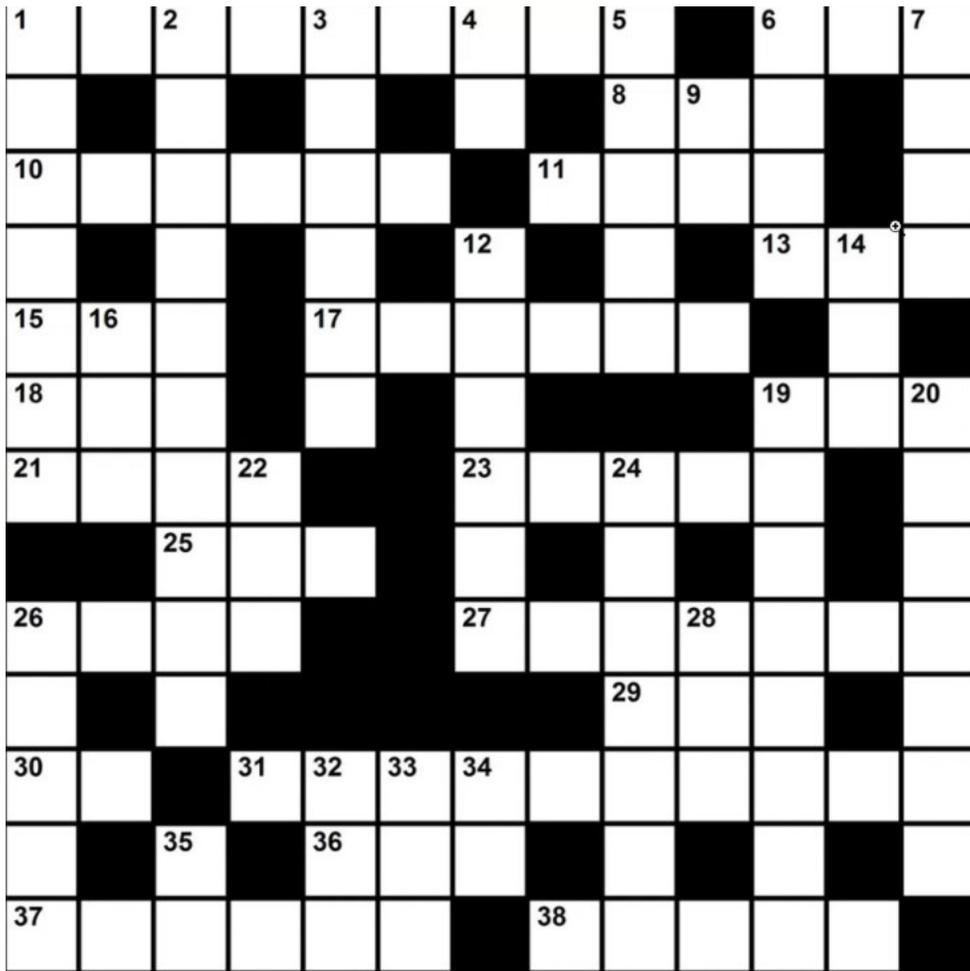
A few hours later, we neared Tampa. Some of the older scouts may have figured it out then, but many of the newer scouts were still left wondering. In the morning, a rumor sprouted that we would be going geocaching... By 9:30am, everyone knew that we were actually going to Busch Gardens for a day of thrills, excitement, and a wallop of a good time.

We separated into our patrols and began exploring the park promptly at 10am. The lines were long, but well worth it, as Jonathan Farrell will tell you. He seems to have ridden every ride at the park. And to top it all off, the Shaman met the 4 G's with bravery and determination. I'm certain that the rest of the park's patrons enjoyed the many songs the boys decided to sing while waiting patiently, sometimes for more than an hour, to board their rollercoasters.

Fun was had by all! Many of us enjoyed getting to see, and learn about, some fascinating animals. Others simply took in the sights, smells, and turkey legs. You mustn't forget the turkey legs.

All-in-all, the Mystery Campout was a tremendous success and, rest assured, the Scout Master and ASM's are already planning for next year. I personally cannot thank Mr. Slayden, Mr. Brown, and Dr. Rice enough. Even though they no longer have boys in scouting, they continue to give up precious weekends to help our boys grow to become the successful young men we know they will be.





**Across**

- 1. Merit badge for this cinematic technique
- 6. It's part of a Scout's uniform
- 8. Environmental watchdogs, for short
- 10. Technology that you'll encounter while working on the Programming merit badge
- 11. Do the crawl, for example
- 13. Worn while sleeping
- 15. Period of time in history
- 17. Merit badge that teaches about plants and animals
- 18. Sprint or jog
- 19. Bottom line
- 21. Dog's cry you might hear while working on the Pets merit badge
- 23. Merit badge that teaches Scouts how to play an instrument or sing
- 25. "That's amazing!"
- 26. \_\_\_\_ Study merit badge, the subject of ornithology
- 27. You may go down these while completing the Snow Sports merit badge, two words
- 29. Have a salad, say
- 30. Start
- 31. It shows debits and credits, something you will encounter while earning the American Business merit badge

- 36. Tree you might study in the Nature merit badge
- 37. Merit badge dealing with the different forms of power used and conserved by man
- 38. A horse says this

**Down**

- 1. Merit badge in which you gain expertise in using a bow and arrow
- 2. Merit badge teaching Native American history, two words
- 3. Sunshade
- 4. Popular
- 5. More modern
- 6. Merit badge that teaches how to live outside
- 7. Cats, dogs, birds, fish for example
- 9. Circumference divided by diameter
- 12. Collecting these is a hobby, and it is also the subject of a merit badge
- 14. French for game
- 16. Regret
- 19. \_\_\_\_\_ Heritage, a merit badge that teaches the history of the Scouting movement
- 20. You'll understand systems for sending one of these in the Signs, Signals and Codes merit badge
- 22. Pea holder
- 24. Animal \_\_\_\_\_, a merit badge that teaches about livestock
- 26. "Reveille" is one of these type of calls; there's a merit badge about this
- 28. A mammal that's a pest
- 32. Part of a machine
- 33. Low island
- 34. Approve
- 35. \_\_\_, the people



# TROOP 111 TRIBUNE

Newsorthy articles, dates, and other things

October 23rd, 2017



10/24/17– Troop Meeting  
Class A

10/31/17– NO Meeting! (or maybe a party, check with Josh)

11/3/17-11/5/17– OA Section Leadership Summit

11/7/17– Patrol Meeting  
ClassB

11/10/17-11/12/17– **Mystery Campout**

11/14/17– Troop Meeting  
Class A

11/21/17– Troop Meeting  
Class A

11/23/17– Thanksgiving Day

11/28/17– Troop Meeting  
Class A

12/5/17– PLC Meeting

12/12/17– Patrol Meeting  
Class B

"A week of camp life is worth six months of theoretical teaching in the meeting room." Baden-Powell

Riddle: A farmer had 17 sheep. All but 9 died. How many does he have now?

Answer : Nine



## In This Issue

- Campout Wrapup– Fort Cooper
- Mystery Campout– Info of the non-spoiler alert kind
- Popcorn Sales Info and Paper Form Deadline
- Nashville Songwriters In-the-Round

## Fort Cooper Campout– Wrapup

The Fort Cooper campout seemed to take months to finally arrive, and only seconds to complete. Time flies when you're having fun, or so they say. We arrived at the campground at nearly 10pm on Friday night. There was some head scratching and a few uturns until it was determined that we were at the wrong gate, initially, which completely explained why it was padlocked, and not clipped as the email indicated it would be. Fortunately, all of the words were read and poorly written directions deciphered which lead us to the correct entrance. Once there, the boys made quick work of setting up camp.

Saturday morning seemed to show up in an instant and it was time to prepare breakfast and hit the pavement for the day's biking adventure.



Josh then broke the group into two smaller biking patrols. One with the older scouts who were prepared to bike approximately 24 miles, and one with the younger scouts planning on 10. At the 5 mile mark, everyone joined back up for a water break and one batch of boys decided that was a good turning around spot and returned to camp for lunch and planning for signoffs. 3 of the younger scouts decided to press on and turned around about another half mile down the path to round their ride off to just over 11 miles round trip.

The older boys went on down the path and arrived back at the same time as the younger scouts who turned back at the 5.6 mile mark. This was accomplished by deciding pizza and camp sounded pretty good. So, rather than riding down the road to the 12 mile mark and returning the way they came, they tossed the bikes on the bus and returned to camp with the pizza.

There is apparently a caboose at the end of the 46 mile trail and there is talk of trailering the bikes to 12 or 15 miles from that point and letting the boys see that end of the trail next year. We'll have to wait until next year to find out though!

# Mystery Campout...

Where will we be going this year???



IT IS A  
MYSTERY

That's right! It's that time of year again. The mystery campout is right around the corner and just 3 weeks away! Mr. Farrell has added it to ScoutPay for everyone so that you can get signed up. Remember, signing up for this campout must be done by **November 5th**, no later. Late sign ups will not be accepted for this campout because of the logistics involved with shirts, patches, and planning. Please plan accordingly and make sure you reach out to Mr. Lange or Mr. Williams if you have any issues with your ScoutPay account which would prevent you from signing up on time.

Remember, this is the campout that no one wants to miss.



## Important Note about Popcorn Sales– Deadline is tomorrow!

As we are all aware by now, the average cost for a Boy Scout summer camp is around \$300 for an entire week of adventure and learning. However, there are often other costs too. We have uniforms, transportation, equipment, etc. Popcorn sales can help fund your adventure!

When you make a sale using the online method, **50%** of the cost of those items is going to come right back to your ScoutPay account every quarter (that's every 3 months for you non-business terminology types). If you sell \$600 in product, you're getting \$300 back which will almost entirely pay for one summer camp.

But wait, there's more... If you sell \$2,500 worth of popcorn products in any calendar year, you will qualify for a scholarship to start earning money for college. That's right, not only will you get the \$1,250 back in your ScoutPay (for online sales), or up to 32% if all the sales were on paper forms, you will also qualify to earn an additional 6% back in the form of a scholarship for college for all sales, no matter how large or small, for all future years!

You can find so much more information here:

<https://www.gulfstreamcouncil.org/popcorn>

**The last day to turn in paper order forms is next Tuesday, October 24th!**

If you have paper orders, please make sure you bring them to the meeting on that day. If you are unable to attend the meeting, please reach out to Mrs. Lange to make arrangements to get your orders to her.

Her email address is [g8trwife@yahoo.com](mailto:g8trwife@yahoo.com).



# Fundraiser to Help Gulf Stream Council Fund New Troops

## Date/Time:

Nov 9, 2017 7:30 pm to 10:00 pm

## Location:

Harriet Himmel Theater  
700 S Rosemary Ave  
West Palm Beach, FL 33401

2017 Nashville Songwriters in the Round benefiting the Restoring the Village programs of the Gulf Stream Council, Boy Scouts of America. Featuring Big Al Anderson, Shawn Camp, and Pat McLaughlin. This one-of-a-kind performance is a must-attend for any fan of music and the art of songwriting. If you are interested, register now because space is extremely limited.



**RESERVE YOUR TICKET  
OR TABLE NOW - SPACE IS LIMITED**

<b>Individual Ticket</b>	<b>4 Top Table</b>	<b>10 Top Table</b>
<b>\$125</b>	<b>\$500</b>	<b>\$1250</b>

**FOR TICKETS:** [www.Gulfstreamcouncil.org/songwriters17](http://www.Gulfstreamcouncil.org/songwriters17)

**CONTACT:** Jeff Snow / Senior District Executive - Gulf Stream Council, BSA / 561-248-3303 / [jeff.snow@scouting.org](mailto:jeff.snow@scouting.org)

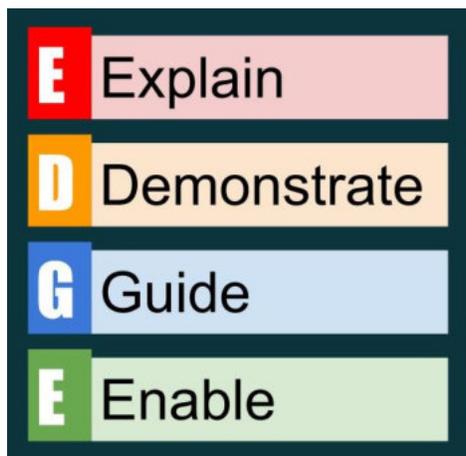




# TROOP 111 TRIBUNE

News-worthy articles, dates, and other things

October 16th, 2017



10/17/17– Patrol Meeting  
Class B

10/20/17-10/22/17– Campout

10/31/17– NO Meeting! (or maybe a party, check with Josh)

11/3/17-11/5/17– OA Section Leadership Summit

11/7/17– Patrol Meeting  
ClassB

11/10/17-11/12/17– **Mystery Campout**

11/12/17– Troop Meeting  
Class A

11/14/17– Troop Meeting  
Class A

11/21/17– Troop Meeting  
Class A

11/23/17– Thanksgiving Day

11/28/17– Troop Meeting  
Class A

I urge you to rededicate yourselves to the ideals of the Scout Oath, and to reaffirm your obligations to your God and to your country. In so doing, you will contribute to the strengthening of America's heritage and thereby to the realization of our common goals in the Great Society. —Lyndon Baines Johnson

Riddle: Give me food, and I will live. Give me water, and I will die. What am I?

Answer: Fire



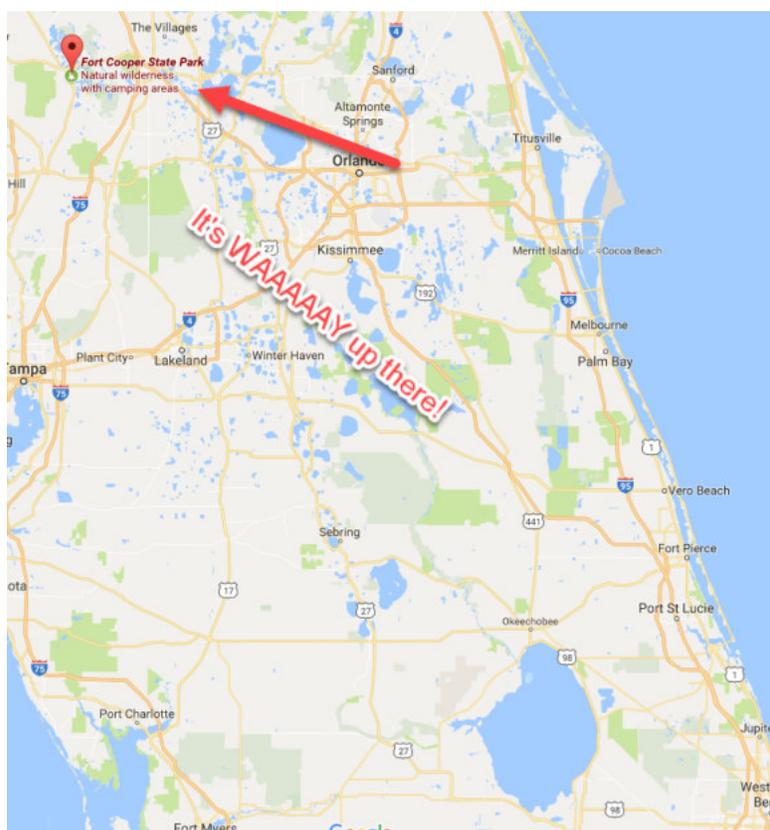
## In This Issue

- Upcoming Campout– Fort Cooper
- Popcorn Sales Info and Paper Form Deadline
- Nashville Songwriters In-the-Round
- EDGE Method Recap

## Fort Cooper Campout

The last day to sign up for the Fort Cooper campout is today, October 16th! If you have not yet signed up on Scout Pay, need to make arrangements to get funds to pay for the campout, or are unsure of how to sign up on Scout Pay, please reach out to Mr. Williams, or Mr. Lange. Mr. Lange can be reached at [Darrell\\_wpb@yahoo.com](mailto:Darrell_wpb@yahoo.com).

For those of you who are unsure of where Fort Cooper is located:



Hopefully you have all made sure that your gear is ready to go. This includes your bicycle and 2 replacement tubes. As Josh said last week, it is important that the tubes you bring are the correct size for your bicycle. Lots of important skills are going to be learned. I would venture to bet that the super helpful and awesome EDGE method might even get used.

## Important Note about Popcorn Sales

As we are all aware by now, the average cost for a Boy Scout summer camp is around \$300 for an entire week of adventure and learning. However, there are often other costs too. We have uniforms, transportation, equipment, etc. Popcorn sales can help fund your adventure!

When you make a sale using the online method, **50%** of the cost of those items is going to come right back to your ScoutPay account every quarter (that's every 3 months for you non-business terminology types). If you sell \$600 in product, you're getting \$300 back which will almost entirely pay for one summer camp.

But wait, there's more... If you sell \$2,500 worth of popcorn products in any calendar year, you will qualify for a scholarship to start earning money for college. That's right, not only will you get the \$1,250 back in your ScoutPay (for online sales), or up to 32% if all the sales were on paper forms, you will also qualify to earn an additional 6% back in the form of a scholarship for college for all sales, no matter how large or small, for all future years!

You can find so much more information here:

<https://www.gulfstreamcouncil.org/popcorn>

**The last day to turn in paper order forms is next Tuesday, October 24th!**

If you have paper orders, please make sure you bring them to the meeting on that day. If you are unable to attend the meeting, please reach out to Mrs. Lange to make arrangements to get your orders to her.

Her email address is [g8trwife@yahoo.com](mailto:g8trwife@yahoo.com).



# Fundraiser to Help Gulf Stream Council Fund New Troops

## Date/Time:

Nov 9, 2017 7:30 pm to 10:00 pm

## Location:

Harriet Himmel Theater  
700 S Rosemary Ave  
West Palm Beach, FL 33401

2017 Nashville Songwriters in the Round benefiting the Restoring the Village programs of the Gulf Stream Council, Boy Scouts of America. Featuring Big Al Anderson, Shawn Camp, and Pat McLaughlin. This one-of-a-kind performance is a must-attend for any fan of music and the art of songwriting. If you are interested, register now because space is extremely limited.



**RESERVE YOUR TICKET  
OR TABLE NOW - SPACE IS LIMITED**

<b>Individual Ticket</b>	<b>4 Top Table</b>	<b>10 Top Table</b>
<b>\$125</b>	<b>\$500</b>	<b>\$1250</b>

**FOR TICKETS:** [www.Gulfstreamcouncil.org/songwriters17](http://www.Gulfstreamcouncil.org/songwriters17)

**CONTACT:** Jeff Snow / Senior District Executive - Gulf Stream Council, BSA / 561-248-3303 / [jeff.snow@scouting.org](mailto:jeff.snow@scouting.org)



## EDGE Method Recap (because you'll see it over and over again)

First, you **Explain** how it's done.

"I'm going to roast this marshmallow over the fire until it's golden brown. Then I'm going to sandwich it between two graham crackers and a piece of chocolate."

Then, you **Demonstrate** the steps you just explained.

Narrate your actions to reinforce the first step.

Next, you **Guide** the learners as they practice.

Give the Scouts their own materials and let them try. Offer help when needed, and let the learner repeat until they've got it down.

Finally, you **Enable** them to succeed.

This is when you step back, sit down and watch. (Eating the demonstration materials is highly recommended.)

When teaching someone a new skill — be it splinting a broken arm or something equally important like making s'mores — the Teaching EDGE method is the best method.

### The Teaching EDGE in Boy Scouting

To earn **Tenderfoot**, a Scout must "Describe the steps in Scouting's Teaching EDGE method. Use the Teaching EDGE method to teach another person how to tie the square knot."

To earn **Life**, a Star Scout must "Use the Teaching EDGE method to teach another Scout (preferably younger than you) the skills from ONE of the following choices, so that he is prepared to pass those requirements to his Scoutmaster's satisfaction."

The Teaching EDGE is so important that it even appears in the *Boy Scout Handbook* (page 38 of the 13th/newest edition):

The first step is **explain**. The teacher carefully explains the skill, showing all the steps and keeping in mind that the learner is probably seeing this for the first time. Go slowly, make your actions deliberate, and use descriptive language, but don't stop to show the intricacies in detail yet.

After explaining the skill, you will **demonstrate** it. Break down each element, showing the step-by-step process and explaining the details of how each step is done and why. Here is where you allow the learner to ask questions, but not yet where he takes the reins for himself.

Now, **guide** the learner as he makes his first few attempts at the skill. Be sure to let him be completely hands-on, and don't worry if he makes mistakes. Just tell him how to fix it, or start again from the beginning. Keep at it, and be careful not to lose patience. Remember how you were when you were learning!

Lastly, the teacher **enables** the learner by allowing him to see that he can do it himself — and has! The Teaching EDGE method can be applied to teaching and learning any skill.

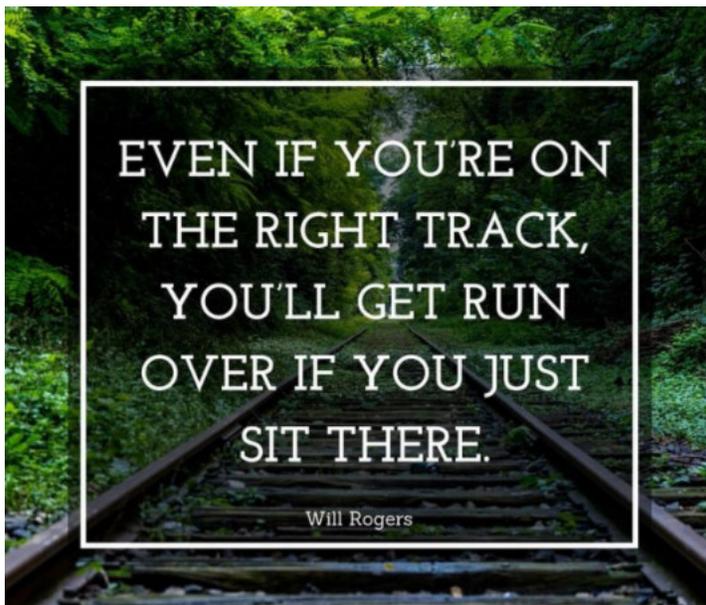
<https://blog.scoutingmagazine.org/2017/05/05/living-on-the-edge-this-is-the-correct-way-to-teach-someone-a-skill/>



# TROOP 111 TRIBUNE

Newsorthy articles, dates, and other things

October 9th, 2017



10/10/17– Troop Meeting  
Class A

10/17/17– Troop Meeting  
Class A

10/20/17-10/22/17– Campout

10/31/17– NO Meeting! (or maybe a party, check with Josh)

11/3/17-11/5/17– OA Section  
Leadership Summit

11/7/17– Patrol Meeting  
ClassB

11/10/17-11/12/17– **Mystery Campout**

11/12/17– Troop Meeting  
Class A

11/14/17– Troop Meeting  
Class A

11/21/17– Troop Meeting  
Class A

11/23/17– Thanksgiving Day

**“We are not a club or a Sunday school class, but a school of the woods.” – Robert Baden-Powell**

**Riddle:** A woman is travelling around London when she passes Trafalgar Square she is sent straight to jail but she has done nothing wrong. Why is this?

Answer: She is playing Monopoly



## In This Issue

- **Meeting Location Change– last reminder**
- Upcoming Campout– Fort Cooper
- Camp Davis Cleanup Thank You
- Popcorn Sales Info– scholarship opportunity

## Fort Cooper Campout

That's right, folks; it's nearly time to camp. That means it's time to shake the bugs and dirt out of your tents, prepare your gear, make sure your gear is complete, and because this campout is extra special, it is also time to make sure your bike is in good working order. You will be learning some important lessons on this campout relating to bicycle safety and maintenance, so please bring 2 spare tire tubes with you. Don't miss the first campout of the season! It is on ScoutPay now.

If you need to make arrangements, please reach out to Mr. Lange or Mr. Williams tomorrow night. We don't want anyone to miss any campouts because there isn't enough money in their ScoutPay account.

There is some interesting history at this State Park in Inverness.

"Fort Cooper is a quiet place, a woodland on the shores of Lake Holathlikaha just south of Inverness, a place where families come to play and picnic and walk gentle trails where wildlife sightings are almost guaranteed. But the reason for this state park isn't as blissful. During the Second Seminole War, a battalion of war-weary soldiers were making their way south on foot along the military trail connecting Fort King (Ocala) with Fort Brooke (Tampa) when Seminole warriors attacked the already-injured men. Their leader, Major Mark Anthony Cooper, directed that a log fort be quickly built for protection, and those who were able continued to stave off the intermittent attacks until the wounded were well enough to keep walking. You can hike in these soldiers' footsteps along the very trail they followed, and enjoy interpretive walks in a variety of habitats around the lake."



## Camp Davis Clean Up

Thank you to everyone who managed to cleanup Camp Davis! It was a big project that doubled as an opportunity to take care of some much needed trailer cleanup in preparation for this year's camping season as well! I'm sure Mr. and Mrs. Davis greatly appreciated everyone's efforts getting the driveway back into a drivable state.

## New Location for Meetings

Starting this week, the new location for meetings will be the Royal Palm Beach Recreation Center:

100 Sweet Bay Ln,  
Royal Palm Beach, FL  
33411



## Important Note about Popcorn Sales

As we are all aware by now, the average cost for a Boy Scout summer camp is around \$300 for an entire week of adventure and learning. However, there are often other costs too. We have uniforms, transportation, equipment, etc. Popcorn sales can help fund your adventure!

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But wait, there's more... If you sell \$2,500 worth of popcorn products in any calendar year, you will qualify for a scholarship to start earning money for college. That's right, not only will you get the \$1,250 back in your ScoutPay (for online sales), or up to 32% if all the sales were on paper forms, you will also qualify to earn an additional 6% back in the form of a scholarship for college for all sales, no matter how large or small, for all future years!

You can find so much more information here:

<https://www.gulfstreamcouncil.org/popcorn>



## Popcorn Sales– Do this! Your parents will thank you!

Hello Everyone,

It is popcorn season again and I have some information for all of you.

Troop 111 will be taking orders for popcorn from now until October 30th. Selling popcorn is very easy and a good way to earn money for your scout account to pay for all the new campouts coming up this year.

There are two way to participate in the popcorn sales:

1). Take the order form (I will have some at the meeting if you didn't get one in the mail) and ask your friends, family, parents co-workers, and people from your neighborhood if they would like to order popcorn from you in order to help you go camping. You **MUST** collect the funds for the popcorn at the time of the order (cash or a check payable to Troop111). I will then order the popcorn when the deadline is done (Oct 30th) and we will receive the popcorn by November 16th to be handed back to the people who ordered from you. A suggestion

2). Create an online account and email, twitter, facebook the information to all of your friends and family. You receive 50% of the commission from the sales of all online purchases. Go to [trails-end.com](http://trails-end.com) and set up an account. You have the ability to post a picture, write a story of what you are selling the popcorn for or what you are experiencing by being a scout. **BE CREATIVE!!!!** When sending this website information out to people you **MUST** include the online scout id number it will give you when you setup your account in order to get credit for the sales. It will ask you for the following information when setting up your account: Council is Gulf Stream, District is Lighthouse, Charter group is CAFCI (Caribbean American For Community Involvement). All

If you have questions about either of these selling processes you can email me or ask at the meeting Tuesday night. My email is [g8trwife@yahoo.com](mailto:g8trwife@yahoo.com).

YIS,

Mrs. Lange

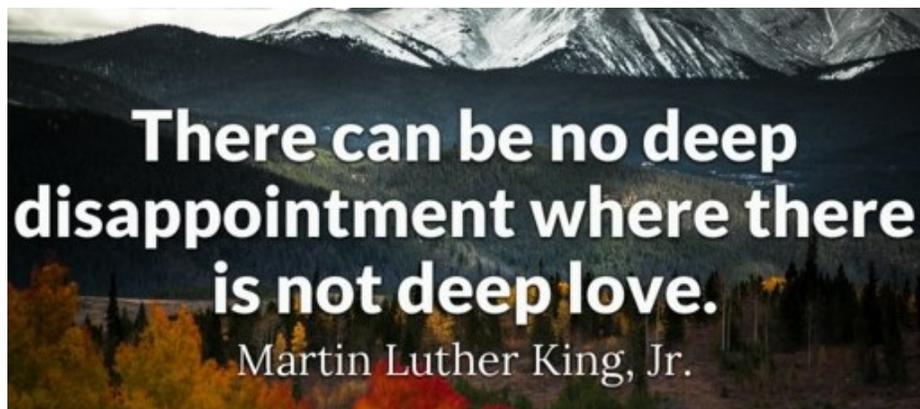




# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

September 18th, 2017



9/19/17– Troop Meeting Class A  
**Parent Meeting– 7pm**

9/24/17– Clean Up Camp Davis  
1-4pm @ Camp Davis

9/26/17– Troop Meeting  
Class A

10/3/17– PLC/Committee Meeting  
Class B

10/10/17– Troop Meeting  
Class A

10/17/17– Troop Meeting  
Class A

10/20/17-10/22/17– Campout

10/31/17– NO Meeting!

11/3/17-11/5/17– OA Section  
Leadership Summit

11/7/17– Patrol Meeting  
Class B

11/10/17-11/12/17– **Mystery Campout**

**We never fail when we try to do our duty, we always fail when we neglect to do it.—Robert Baden-Powell**

Riddle: Which is faster—heat or cold?

Answer: Heat-you can catch a cold



## In This Issue

- **MEETING LOCATION CHANGE**
- Camp Davis Cleanup
- Upcoming Campout– cancelled
- Popcorn Sales Info
- Parent Meeting Information– **This Week**

## Peace River Campout

Unfortunately, the Peace River campout had to be cancelled. The campground was not reachable by phone after Hurricane Irma passed through. We will do our best to reschedule this campout for later in the year.



## Camp Davis Clean Up

Good afternoon Troop 111 Scouts & Families,

I hope everyone is getting back to their usual routines and had an opportunity to clean up, after Hurricane Irma.

I have been in contact with our wonderful Charter Organization this past weekend and discovered, that Camp Davis is in need of The Scouts and their families. Thankfully, no structural damages were noted, however, many of the beautiful tree's have been.

Since, as you already know, The Peace River Campout for this weekend has been cancelled, this leaves the Troop a perfect opportunity to give back to our Charter & organize, "Clean Up Camp Davis Day" as well as a full Trailer Clean-up. Details below. Please plan to bring a full water bottle, SUNSCREEN, hats, gloves and eat lunch prior to arrival. Snacks will be provided!

For ADULTS:

We are in need of a couple chainsaws. Please respond back if you have one of these and are able to support this event.

### CLEAN UP CAMP DAVIS:

When: Sunday, September 24th from 1-4pm.

Where: Camp Davis

We will be organizing snack donations at Tuesday Nights Mandatory Parent meeting.

I look forward to seeing each of you then.

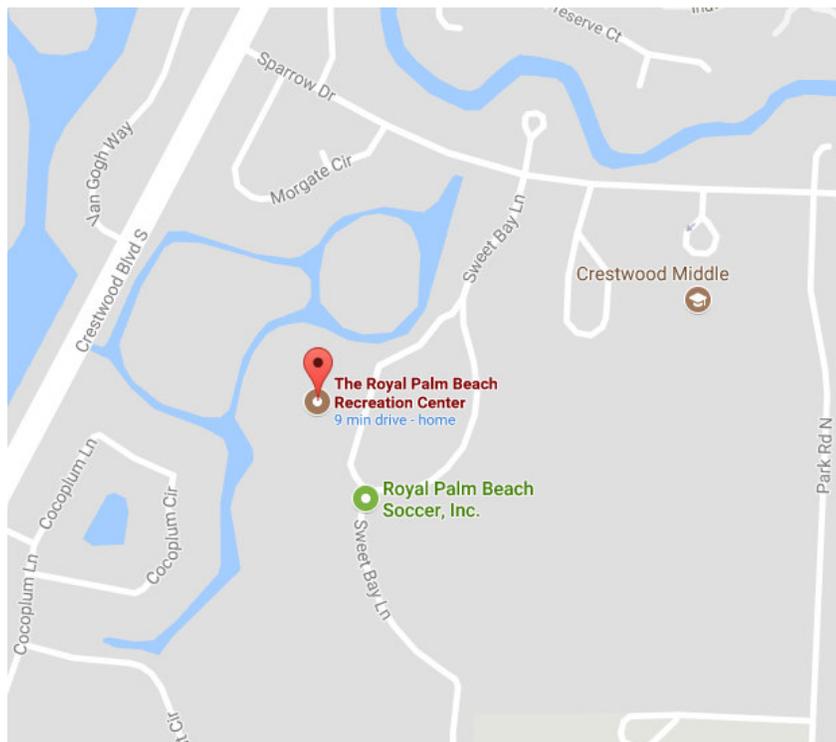
YIS,

Cheri Estevez, R.N.

## New Location for Meetings

Starting this week, the new location for meetings will be the Royal Palm Beach Recreation Center:

100 Sweet Bay Ln,  
Royal Palm Beach, FL  
33411



## Parent Meeting

Hello parents, please come to the parent meeting tomorrow, September 19th, at 7:00 pm. The meeting will start promptly at 7:00pm. There will be a lot of important information about what we will be doing over the next month. It is a great time to give input and ideas for the troop. So if you want to stay informed come to the parent meeting the second Tuesday of every month.



**ScoutParents**<sup>TM</sup>  
Scouting makes great parents, too!

# Popcorn Sales

Hello Everyone,

It is popcorn season again and I have some information for all of you.

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1). Take the order form (I will have some at the meeting if you didn't get one in the mail) and ask your friends, family, parents co-workers, and people from your neighborhood if they would like to order popcorn from you in order to help you go camping. You **MUST** collect the funds for the popcorn at the time of the order (cash or a check payable to Troop111). I will then order the popcorn when the deadline is done (Oct 30th) and we will receive the popcorn by November 16th to be handed back to the people who ordered from you. A suggestion

2). Create an online account and email, twitter, facebook the information to all of your friends and family. You receive 50% of the commission from the sales of all online purchases. Go to [trails-end.com](http://trails-end.com) and set up an account. You have the ability to post a picture, write a story of what you are selling the popcorn for or what you are experiencing by being a scout. **BE CREATIVE!!!!** When sending this website information out to people you **MUST** include the online scout id number it will give you when you setup your account in order to get credit for the sales. It will ask you for the following information when setting up your account: Council is Gulf Stream, District is Lighthouse, Charter group is CAFCI (Caribbean American For Community Involvement). All

If you have questions about either of these selling processes you can email me or ask at the meeting Tuesday night. My email is [g8trwife@yahoo.com](mailto:g8trwife@yahoo.com).

YIS,

Mrs. Lange





# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

September 4th, 2017



**The most worthwhile thing is to try to put happiness into the lives of others.**  
**Sir Robert Baden-Powell**

9/5/17– PLC/Committee Meeting  
Class B

9/8/17– 9/10– OA National Leadership  
Seminar

9/10/17– **Trailer Cleanup 8:30am**  
**Camp Davis**

9/12/17– Troop Meeting  
Class A

9/19/17– Troop Meeting Class A  
**Parent Meeting– 8pm**

9/22/17-9/24/17– Peace River Campout

9/26/17– Troop Meeting  
Class A

10/3/17– PLC/Committee Meeting  
Class B

10/10/17– Troop Meeting  
Class A

10/17/17– Troop Meeting  
Class A

10/20/17-10/22/17– Campout

Riddle: What kind of house weighs the least?

Answer: a LIGHT house



## In This Issue

- **MEETING LOCATION CHANGE**
- Trailer Cleanup
- Upcoming Campout
- Popcorn Sales Info
- Parent Meeting Information

## Peace River Campout

Peace River camping is happening this month. Keep your eyes on Scoutpay and be prepared to RSVP. If you don't have the funds in Scoutpay, remember to talk with Mr. Lange or Mr. Williams to work something out. We want everyone who wants to attend to attend! Activities are likely to include hiking, canoeing, and other such shenanigans. You won't want to miss it!



## Trailer Cleanup

Part of camping means being prepared to get all the necessary supplies to and from the campground. For that to happen, we occasionally need to come together to go through the trailer, clean it up, and inventory the wares. Your Quartermaster, Jonathan Farrell, is calling on you to be at Camp Davis at 8:30am next Sunday to do just that!

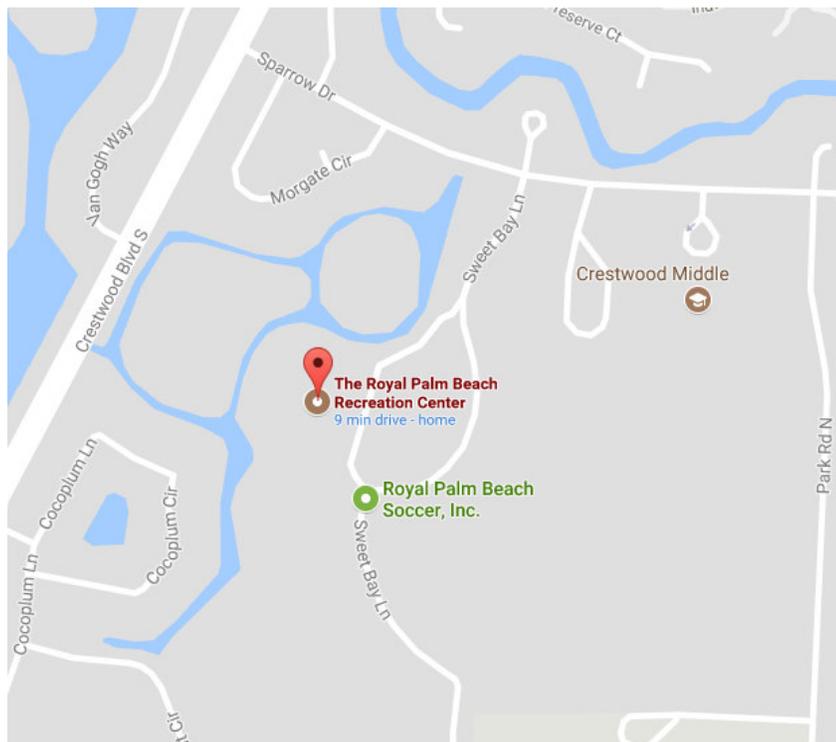
Jonathan, let me know if I got the location wrong. Scouts, let Jonathan know if you can attend!



## New Location for Meetings

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## Parent Meeting

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YIS,

Mrs. Lange





# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

August 20th, 2017



8/22/17– Troop Meeting  
Class A

8/29/17– No Meeting!

9/5/17– PLC/Committee Meeting  
Class B

9/12/17– Troop Meeting  
Class A

9/19/17– Troop Meeting Class A  
**Parent Meeting– 8pm**

September– camping date TBD

9/26/17– Troop Meeting  
Class A

10/3/17– PLC/Committee Meeting  
Class B

10/10/17– Troop Meeting  
Class A

10/17/17– Troop Meeting  
Class A

**BSA Patch Opportunity–  
Monday, September 21st, 2017!!!**

Riddle: Why is a river rich?

Answer: It has two banks



## In This Issue

- Court of Honor– New Leadership Roles
- Solar Eclipse Badge Opportunity
- Weird Things Happen with a Total Solar Eclipse– things to look for
- Popcorn Sales Starting Soon
- Parent Meeting Information

## Popcorn Sales are starting!

### Popcorn Sale Begins!

Date:

Sep 30, 2016

Location - TBD

Show 'n' Sell begins today! Contact your District Kernel if you need more popcorn!



## Parent Meeting

Hello parents, please come to the parent meeting September 19th at 7:45 pm. The meeting will start promptly at 8:00pm. There will be a lot of important information about what we will be doing over the next month. It is a great time to give input and ideas for the troop. So if you want to stay informed come to the parent meeting the second Tuesday of every month.



## COH Patrol Leadership

Congratulations to all of the new Patrol and Assistant Patrol Leaders. These positions of leadership give you each an opportunity to grow both as individuals and as teams who learn to work together to accomplish a common goal. As you go through the next four months, remember to guide your patrols by following the Scout Law and setting a positive example.

### New Patrol & Assistant Patrol Leaders

<b>Elusive Bucks</b>	David King	Luc LaGrange
<b>Howling Wolves</b>	Aiden Harter	Nicolas McNalley
<b>Majestic Tigers</b>	Jacob White	Cole Estevez
<b>Lightning Hawks</b>	Noah Cabrera	Dalton Ballard

## COH New Shaman Officers

Shaman, you have the greatest responsibility. As you progress through the next four months, remember that all other troop members are looking to you for leadership and guidance. Serve them well.

### New Shaman Officers

<b>Senior Patrol Leader</b>	Josh Caudill
<b>Assistant Senior Patrol Leader</b>	Blake Fearon
<b>OA Representative</b>	Nima Aria
<b>Chaplains Aide</b>	Oliver Brown
<b>Scribe</b>	William Gulley
<b>Quartermaster</b>	Jonathan Farrell
<b>Webmaster</b>	Jared Lange

# Weird Things Happen with a Total Solar Eclipse

[http://astromaven.blogspot.com/2017/06/weird-things-happen-with-total-solar\\_72.html?m=1](http://astromaven.blogspot.com/2017/06/weird-things-happen-with-total-solar_72.html?m=1)

Everyone talks about how visually stunning it is when the darkened Moon *fully* covers the face of the Sun in a total solar eclipse. And indeed, it is! But there are other unusual, *truly strange* happenings that occur when the Moon passes in front of the Sun. If you aren't prepared to look for them, some of these weird phenomena are so fleeting that you can miss them. Following are descriptions of a number of those novel occurrences to be looked for on Au-

Long before totality (when the Moon is only covering part of the Sun's face), go to a nearby tree and look in the shade of the tree's shadow. You will see **hundreds** of crescent images of the partially covered Sun all over the ground! In fact, this is a safe way to view all the partial phases of the eclipse without harming your eyes. Where do all these many images come from? The gaps between the tree's leaves act like a pinhole camera by projecting the

Anywhere from 60 to 90 seconds before totality or just after totality ends, closely look at any flat light-colored or white surface you. You may see a very strange sight. At such times, dark lines called **shadow bands** may be seen racing back and forth across faces. These shadowy lines are caused by sunlight peeking around mountains and through valleys around the outer rim of the Moon while turbulence in the air makes them appear to shift position. To see a video of eclipse shadow bands, go here: [https://www.youtube.com/watch?v=f\\_XMnU7Ad40](https://www.youtube.com/watch?v=f_XMnU7Ad40)

In the minutes before totality, all of your surroundings will appear dimly lit in a very strange and different way from your experience at sunrise or sunset. Everything will seem somewhat similar to what you see when you wear very dark sunglasses but with a kind of surreal sheen that can't be described adequately.

As soon as the Moon entirely covers the Sun and causes the sky to completely blacken, the air will instantly chill -- perhaps as much as 20 degrees Fahrenheit. Animals will become confused. Bats may fly around thinking it is night. Birds may roost. Crickets or cicadas may begin to chirp.

If the land is flat for miles around your location or you are on a mountain top, you will be able to see the darkest part of the Moon's shadow (called the umbra) racing across the ground towards you just before totality and away from you afterwards. Here is video of the approaching and leaving umbra as seen from an airplane: <https://www.youtube.com/watch?v=InIUONyIpdM>

An instant before the Sun's disk is completely covered by the Moon, you should experience the visually stunning **diamond ring effect**. The slight bit of Sun remaining will give the impression of a brilliant diamond with the ring being a faint glow around the darkened Moon. Some images of the diamond ring effect can be seen at this link: <https://sunstopper.wordpress.com/diamond-ring-effect/>

# Solar Eclipse Badge Opportunity

Hopefully by now everyone has heard about the upcoming solar eclipse! **For any scouts who would like to participate, please let Mrs. Estevez know so that she can procure enough badges from the Scout Shop. She can be reached by email at: [rn4fl@aol.com](mailto:rn4fl@aol.com)** (that was bold and in red so that you know it is an important step.)

The eclipse is happening on Monday, August 21st. According to Vox.com, the eclipse will be visible in our area at approximately 2:56pm where we will get to see an 81.1% complete eclipse.

With every solar eclipse comes important safety precautions. Please follow them, or be blinded for all time...

- Always inspect your solar filter before use; if scratched or damaged, discard it. Read and follow any instructions printed on or packaged with the filter.
- Always supervise children using solar filters.
- Stand still and cover your eyes with your eclipse glasses or solar viewer before looking up at the bright sun. After looking at the sun, turn away and remove your filter — do not remove it while looking at the sun.
- Do not look at the uneclipsed or partially eclipsed sun through an unfiltered camera, telescope, binoculars, or other optical device.
- Similarly, do not look at the sun through a camera, a telescope, binoculars, or any other optical device while using your eclipse glasses or hand-held solar viewer — the concentrated solar rays will damage the filter and enter your eye(s), causing serious injury.
- Seek expert advice from an astronomer before using a solar filter with a camera, a telescope, binoculars, or any other optical device. Note that solar filters must be attached to the *front* of any telescope, binoculars, camera lens, or other optics.



- If you are within the path of totality (<https://go.nasa.gov/2pC0lhe> (link is external)), remove your solar filter only when the moon completely covers the sun's bright face and it suddenly gets quite dark. Experience totality, then, as soon as the bright sun begins to reappear, replace your solar viewer to look at the remaining partial phases.
- Outside the path of totality, you must *always* use a safe solar filter to view the sun directly.
- If you normally wear eyeglasses, keep them on. Put your eclipse glasses on over them, or hold your handheld viewer in front of them.

See more here: <https://eclipse2017.nasa.gov/safety>

If you will be participating, you will need the participation form. I'm including it on the next couple of pages, or you can download it here: <http://usscouts.org/advance/docs/Boy-Scout-Solar-Eclipse-Workbook.pdf>



# Boy Scout Solar Eclipse 2017 Workbook



The work space provided for each requirement should be used by the Scout to make notes for discussing the item with his leader, not for providing the full and complete answers. Each Scout must do each requirement.

The requirements were last issued or revised in 2017 • This workbook was updated in July 2017.

Scout's Name: \_\_\_\_\_ Unit: \_\_\_\_\_

Counselor's Name: \_\_\_\_\_ Counselor's Phone No.: \_\_\_\_\_

<http://www.USScouts.Org> • <http://www.MeritBadge.Org>

Please submit errors, omissions, comments or suggestions about this **workbook** to: [Workbooks@USScouts.Org](mailto:Workbooks@USScouts.Org)  
Comments or suggestions for changes to the **requirements** for the **award** should be sent to: [Advancement.Team@Scouting.Org](mailto:Advancement.Team@Scouting.Org)

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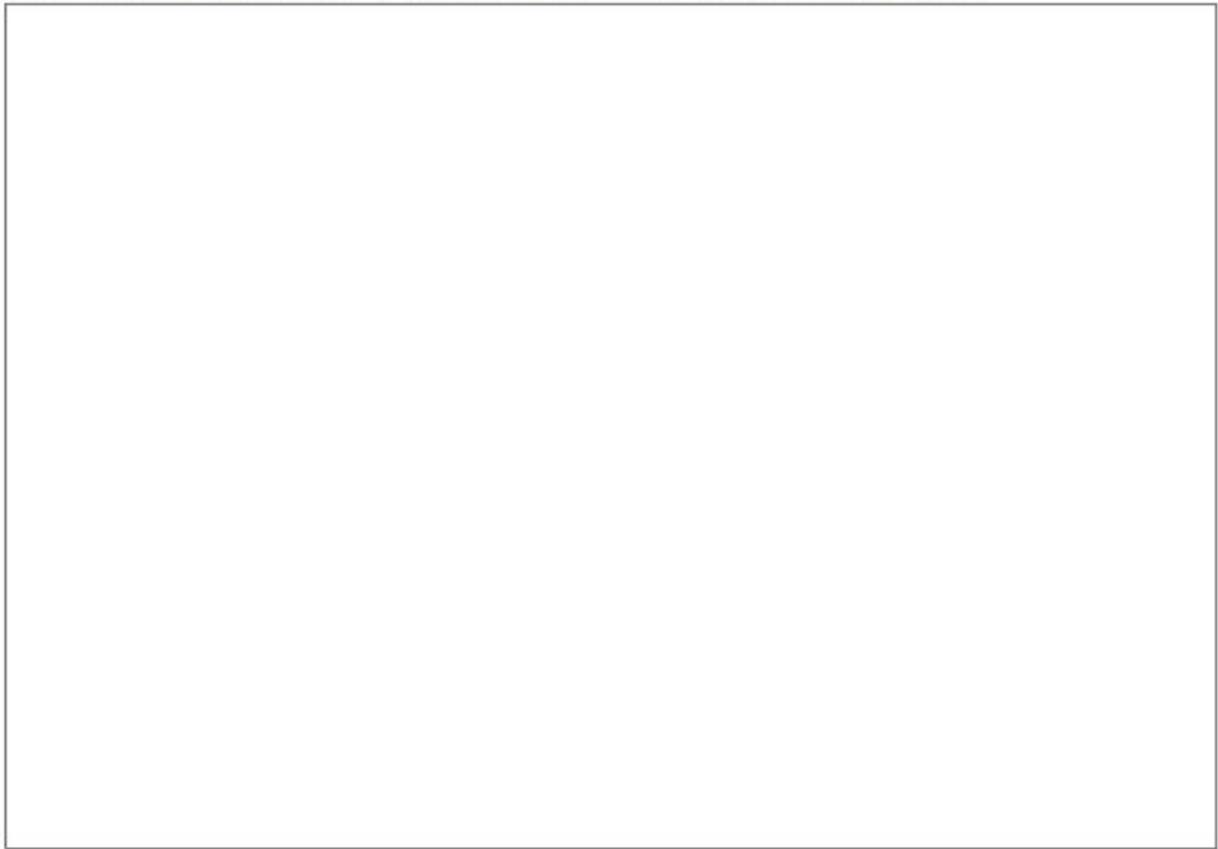
## 2017 Solar Eclipse Patch

1. **Locate a site suitable for viewing the eclipse.** Search Google for "eclipse viewing" and the name of your city or town to find events near you. Write down the location you went to below.


2. **Describe how to safely view the eclipse.**


3. **Discuss with your group** what you saw and felt during the eclipse. Post your comments and eclipse photos on social media using the hashtag **#BSAEclipse2017**.


4. Draw a diagram of the positions of the moon, earth, and sun to show how the solar eclipse occurs.



5. Ask your unit leader to buy the 2017 Solar Eclipse patch from your local service center.

The USSSP wishes to thank Diana M. Shafer of Lafayette, LA, who prepared this workbook.

Requirement resources can be found here:

- Exact path and precise timings: <https://www.nasa.gov/feature/goddard/2017/nasa-moon-data-provides-more-accurate-2017-eclipse-path>
- Safety tips for viewing the solar eclipse: <https://eclipse2017.nasa.gov/safety>
- Official BSA site for the eclipse <http://www.scouting.org/eclipse2017.aspx>



# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

August 7th, 2017



8/8/17– Troop Meeting– Elections!  
Class A

8/15/17– Court of Honor!  
Class A

8/16/17– Round Table Meeting

8/22/17– Troop Meeting  
Class A

8/29/17– No Meeting!

9/5/17– PLC/Committee Meeting  
Class B

9/12/17– Troop Meeting  
Class A

9/19/17– Troop Meeting  
Class A

9/26/17– Troop Meeting  
Class A

10/3/17– PLC/Committee Meeting  
Class B

As we leave another summer behind us, let's remember that scouts are to always be prepared for what's next and yet to come.

Riddle: How many seconds are there in a year?

Answer: 12– Jan 2nd, Feb 2nd, March 2nd, April 2nd, etc.



## In This Issue

- Woodruff Recap
- Solar Eclipse Badge Opportunity
- 5 Ways to Find North without a Compass

## Camp Woodruff Recap



It was the adventure of a lifetime, yet was over in the blink of an eye. This was an amazing week full of memories for those who were fortunate enough to attend. Countless signoffs and stories were logged on this trip. Great job T111 for representing yourselves and exemplifying scout spirit. It did not go unnoticed. The staff there were more than pleased at how well you all presented yourselves!

Keep up the good work, Troop! Another season of campouts is about to begin.

# Solar Eclipse Badge Opportunity

Hopefully by now everyone has heard about the upcoming solar eclipse! **For any scouts who would like to participate, please let Mrs. Estevez know so that she can procure enough badges from the Scout Shop. She can be reached by email at: [rn4fl@aol.com](mailto:rn4fl@aol.com)** (that was bold and in red so that you know it is an important step.)

The eclipse is happening on Monday, August 21st. According to Vox.com, the eclipse will be visible in our area at approximately 2:56pm where we will get to see an 81.1% complete eclipse.

With every solar eclipse comes important safety precautions. Please follow them, or be blinded for all time...

- Always inspect your solar filter before use; if scratched or damaged, discard it. Read and follow any instructions printed on or packaged with the filter.
- Always supervise children using solar filters.
- Stand still and cover your eyes with your eclipse glasses or solar viewer before looking up at the bright sun. After looking at the sun, turn away and remove your filter — do not remove it while looking at the sun.
- Do not look at the uneclipsed or partially eclipsed sun through an unfiltered camera, telescope, binoculars, or other optical device.
- Similarly, do not look at the sun through a camera, a telescope, binoculars, or any other optical device while using your eclipse glasses or hand-held solar viewer — the concentrated solar rays will damage the filter and enter your eye(s), causing serious injury.
- Seek expert advice from an astronomer before using a solar filter with a camera, a telescope, binoculars, or any other optical device. Note that solar filters must be attached to the *front* of any telescope, binoculars, camera lens, or other optics.



• If you are within the path of totality (<https://go.nasa.gov/2pC0lhe> (link is external)), remove your solar filter only when the moon completely covers the sun's bright face and it suddenly gets quite dark. Experience totality, then, as soon as the bright sun begins to reappear, replace your solar viewer to look at the remaining partial phases.

• Outside the path of totality, you must *always* use a safe solar filter to view the sun directly.

•

• If you normally wear eyeglasses, keep them on. Put your eclipse glasses on over them, or hold your handheld viewer in front of them.

See more here: <https://eclipse2017.nasa.gov/safety>

If you will be participating, you will need the participation form. I'm including it on the next couple of pages, or you can download it here: <http://usscouts.org/advance/docs/Boy-Scout-Solar-Eclipse-Workbook.pdf>



# Boy Scout Solar Eclipse 2017 Workbook



The work space provided for each requirement should be used by the Scout to make notes for discussing the item with his leader, not for providing the full and complete answers. Each Scout must do each requirement.

The requirements were last issued or revised in 2017 • This workbook was updated in July 2017.

Scout's Name: \_\_\_\_\_ Unit: \_\_\_\_\_

Counselor's Name: \_\_\_\_\_ Counselor's Phone No.: \_\_\_\_\_

<http://www.USScouts.Org> • <http://www.MeritBadge.Org>

Please submit errors, omissions, comments or suggestions about this **workbook** to: [Workbooks@USScouts.Org](mailto:Workbooks@USScouts.Org)  
Comments or suggestions for changes to the **requirements** for the **award** should be sent to: [Advancement.Team@Scouting.Org](mailto:Advancement.Team@Scouting.Org)

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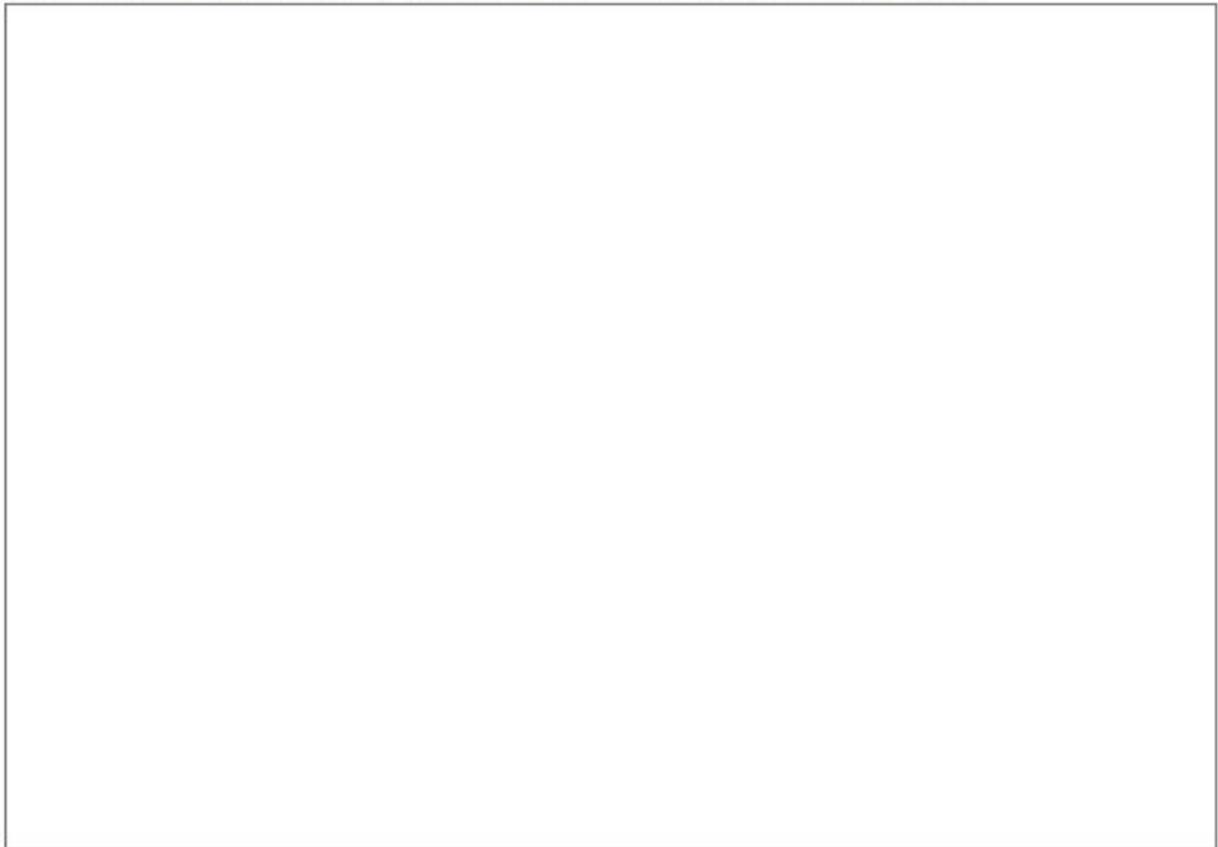
## 2017 Solar Eclipse Patch

1. **Locate a site suitable for viewing the eclipse.** Search Google for "eclipse viewing" and the name of your city or town to find events near you. Write down the location you went to below.


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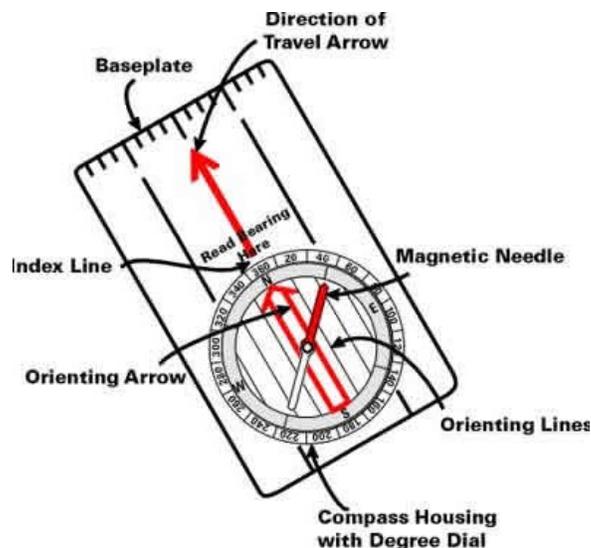
5. Ask your unit leader to buy the 2017 Solar Eclipse patch from your local service center.

The USSSP wishes to thank Diana M. Shafer of Lafayette, LA, who prepared this workbook.

Requirement resources can be found here:

- Exact path and precise timings: <https://www.nasa.gov/feature/goddard/2017/nasa-moon-data-provides-more-accurate-2017-eclipse-path>
- Safety tips for viewing the solar eclipse: <https://eclipse2017.nasa.gov/safety>
- Official BSA site for the eclipse <http://www.scouting.org/eclipse2017.aspx>

## Solar Eclipse Badge Opportunity



## Using Nature to Find Your Way Without a Compass

Of course, it is easier to navigate with a compass, but it pays to know how to orient yourself without one.

When examining a used compass, if it's a liquid-filled type, make sure the bubble (if any) is small, indicating that it hasn't leaked out.

But if you have no compass, you can still orient yourself in a general way. These rules apply in the Northern Hemisphere.

### 1. Find the North Star.

1. Identify the Big Dipper.
2. Identify the two stars at the "pouring end" of the ladle.
3. Mark the distance between them.
4. Draw a line between the two stars at the pouring end of the ladle and extend it 5 times — you'll find Polaris at the end of that line. Polaris is the tip of the Little Dipper's handle.

### 2: Track the Sun With a Stick.

This method is most accurate around noon.

1. Plant a stick vertically in the ground.
2. Place a mark at the tip of its shadow.
3. A half-hour later, place another mark at the tip of the shadow.
4. A line drawn between the marks points approximately East and West.

### 3: Use the Crescent Moon.

This method is most accurate when the moon is at its highest point in the sky.

1. Draw a line between the horns of the crescent.
2. Extend that line down to the horizon — where it touches the ground is approximately South.

**4: Moss on Trees.** This method is most accurate in drier microclimates. Moss will grow on rocks and tree trunks that do not receive much sun; this will tend to occur on the North side of those objects.

**5: Drier Hillsides Face South.** This method works well in dry mountainous regions. North-facing slopes get the least sun and have more water-loving vegetation. South-facing slopes will have less vegetation, or more drought-tolerant vegetation like cacti.

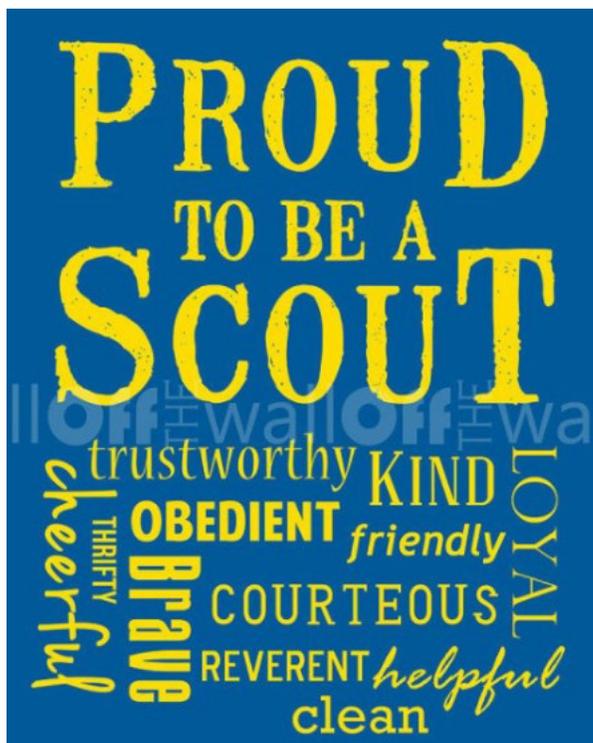
Source: <http://www.survivalnewsonline.com/index.php/2012/12/five-ways-to-find-north-without-a-compass/>



# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

July 17th, 2017



7/18/17– Patrol Meeting– Movie Night  
Class B

7/19/17-7/28/17– National Jamboree

7/23/17-7/29/17– Camp Woodruff

8/1/17– Troop Meeting  
Class A

8/8/17– Troop Meeting  
Class A

8/15/17– Troop Meeting  
Class A

8/16/17– Round Table Meeting

8/22/17– Troop Meeting  
Class A

8/29/17– Troop Meeting  
Class A

9/5/17– Troop Meeting  
Class A

Be proud that you are a scout!

Riddle: Can you drop a full canteen without spilling any water?

Answer: Yes, if the canteen is filled with soda.



## In This Issue

- Not terribly much
- Space traveling worms

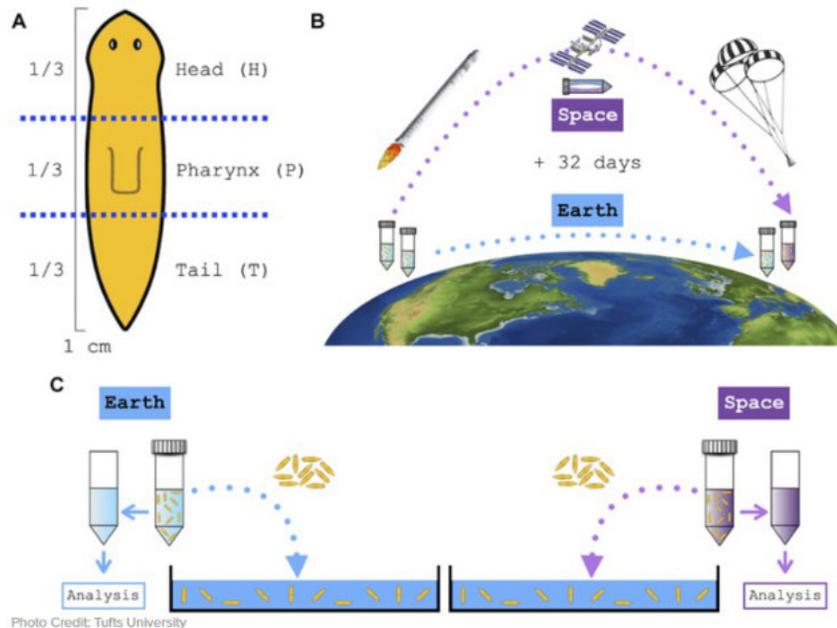
# Space Traveling Worms



Two-headed worm (Photo Credit: Junji Morokuma/Allen Discovery Center at Tufts University)

Worms are not the first thing that come to mind when one thinks of space travelers. However, that is exactly what the researchers from Tufts University decided to send to the International Space Station (ISS) on January 10, 2015. The group of planarian flatworms (*Dugesia japonica*) selected for their ability to **regenerate** any body part, were in varying states. Some were left whole, others had their head or tail sliced off, while a select few were shipped with neither head nor tail!

Though that may sound cruel, the **dismembered** worms, sealed in tubes filled half with water and half with air, were on an important mission. They were being sent to space to observe the impact of **microgravity** and **geomagnetic** fields on tissue **regeneration** and repair of damaged organs and nerves, critical for understanding how wounds heal in space. A control group of worms on Earth was sealed in spring water in the same manner as their space counterparts and kept in darkness at 20 degrees Celsius for the same amount of time.

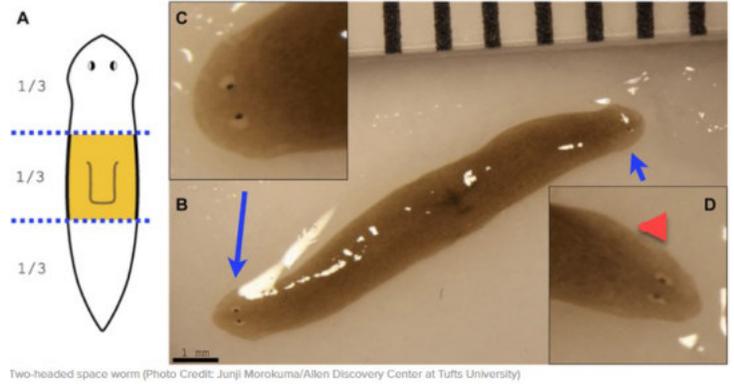


When the space worms returned to Earth on February 11, they had undergone numerous changes, none of which were observed in their **counterparts** on Earth. The most interesting was a **decapitated** worm that had returned from space with two heads – one at each end of its body. This is the first time in the 18 years the scientists have been studying the flatworms that they have observed a natural occurrence of double headedness. When they **amputated** the mutated worm's heads, the middle fragment regenerated another two heads, proving without doubt that the five-week **sojourn** to space had permanently altered the worm's **physiology**. The scientists also noted that specimens which had left Earth intact had multiplied into two or more identical entities through a process called spontaneous **fission**.

# Space Traveling Worms

The two groups also reacted differently to light. Specimens from each group were placed in an area, half of which was **illuminated** by red light, which is not visible to worms, and the other half with blue light. According to the researchers, 95.5 percent of the control worms spent their time in the dark, while only 70.5 percent of the space worms did the same.

The study, led by the Allen Discovery Center at Tufts University, does have some **limitations**. For one, the sample size was small. It was also hard to mimic the temperatures experienced by the worms in space over the course of the entire mission. Future experiments will utilize real-time data from space and adjust the temperatures as necessary for the control group on Earth. Additionally, the stress of liftoff and re-entering the atmosphere was not **replicated**, on Earth, something the researchers plan to **rectify** during the next study. Furthermore, the amputation of worms was done on Earth. In the future, the scientists hope the worm dismembering will occur aboard the ISS.



According to NASA, understanding how the flatworm re-grows its tissue could enable scientists to create new technologies that will allow space travelers on long missions to self-heal, and perhaps even re-grow lost limbs! The research can also help people suffering from a wide range of injuries and physical **impairments**, including spinal cord injuries, and **degenerative** brain diseases such as Parkinson's. And in case you are wondering, the researchers are still trying to find out what caused the space worm to generate two heads — so stay tuned!



Original link: <https://www.dogonews.com/2017/7/5/flatworm-returns-from-space-with-two-heads>



# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

June 26th, 2017



6/27/17– Troop Meeting  
Class A

7/4/17– Troop Meeting  
Class A

7/11/17– Troop Meeting  
Class A

7/18/17– Troop Meeting  
Class A

7/19/17– Round Table Meeting

7/19/17-7/28/17– National Jamboree

7/23/17-7/29/17– Camp Woodruff

8/1/17– Troop Meeting  
Class A

8/8/17– Troop Meeting  
Class A

8/15/17– Troop Meeting  
Class A

8/16/17– Round Table Meeting

A Scout is Reverent: A Scout is reverent toward God. He is faithful in his religious duties. He respects the beliefs of others.

Riddle: What do you call it when you bring the king camping and he climbs a mountain?

Answer: Hiking



## In This Issue

- Note about communication
- Summer Camp Pictures

## Note about communication– one more time

### Boy Scout Oath:

On my honor, I will do my best

To do my duty to God and my country and to obey the Scout Law;

To help other people at all times;

To keep myself physically strong, mentally awake and morally straight.

### Boy Scout Motto:

Be Prepared!

### Boy Scout Slogan:

Do a Good Turn Daily!



ScoutPay provides us all with an opportunity to sign up for events before they happen. Doing so as soon as possible makes it much easier to plan and coordinate with all of the families attending events like Cultural Diversity Day, Eagle Scout projects, and Courts of Honor.

For things like COH and Projects, there is no cost to RSVP via ScoutPay. Please utilize that tool to alert the troop of your intent to participate for these types of events so that everyone involved can plan accordingly.

Also, please don't be afraid to reply to an email that goes out in between newsletters with updates to ask questions or state your intent to participate in something. The sooner we know, the better prepared we can all be. After all, I think Be Prepared is the Boy Scout Motto, but I could be wrong.

If for any reason you need to get in touch with Mr. Williams, Mr. Lange, or Mr. Farrell, here are their email addresses:

Mr. Lange: [darrell\\_wpb@yahoo.com](mailto:darrell_wpb@yahoo.com)

Mr. Farrell: [jgator97@yahoo.com](mailto:jgator97@yahoo.com)

Mr. Williams: [Williamspump@yahoo.com](mailto:Williamspump@yahoo.com)

## Tanah Keeta Pictures

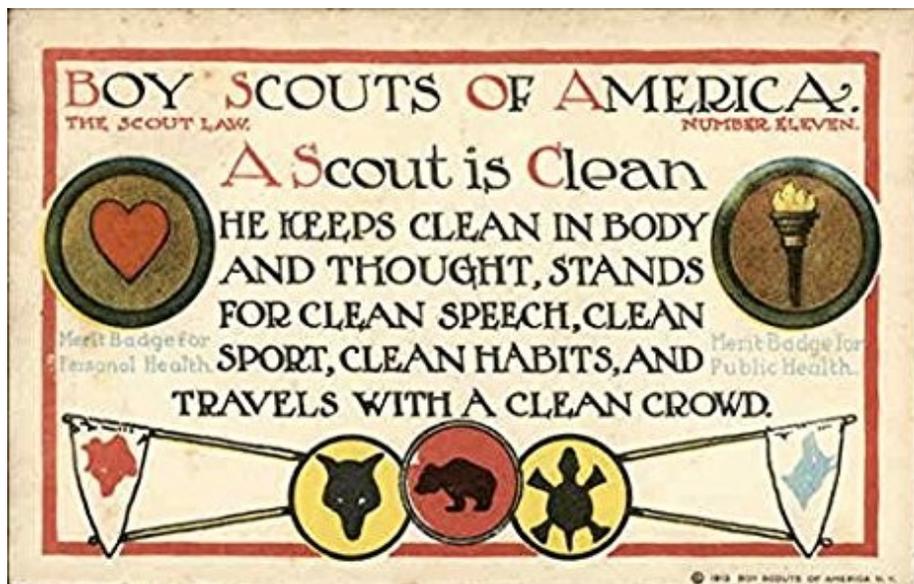




# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

May 22nd, 2017



A Scout is Clean: A Scout keeps his body and mind fit. He helps keep his home and community clean.

5/22/17– Swim Test at Royal Inn 7pm

5/23/17– Patrol Meeting  
Class B

5/26/17-5/29/17– Camp Sawyer– West  
Summerland Key

5/30/17– No Meeting

6/06/17– Troop Meeting  
Class A– Mandatory Parent Meeting for  
1st Time TK summer camp campers  
**DEADLINE FOR HEALTH FORMS**

6/13/17– Troop Meeting  
Class A

6/18/17-6/24/17– TK Summer Camp

6/27/17– Troop Meeting  
Class A

7/4/17– Troop Meeting  
Class A

7/11/17– Troop Meeting  
Class A

7/18/17– Troop Meeting

Riddle: How do you make a hot dog stand in the middle of the woods?

Answer: Steal his chair.



## In This Issue

- Swim Test Information– Last Chance!
- Note about communication
- Summer Camp Forms– Deadline June 6th!

## Note about communication

### Boy Scout Oath:

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If for any reason you need to get in touch with Mr. Williams, Mr. Lange, or Mr. Farrell, here are their email addresses:

Mr. Lange: darrell\_wpb@yahoo.com

Mr. Farrell: jgator97@yahoo.com

Mr. Williams: Williamspump@yahoo.com

## Mandatory Swim Test

We will giving the troop two opportunities to take the BSA swim test for Camp Sawyer and summer camps one on **Monday, May 22nd** at 7:00 PM and one on Saturday, **May 20 at 8:30 AM** both will be held at the swimming pool at the Royal Inn, located at the corner of Southern Blvd. and RPB Blvd. If you cannot make one of these dates, contact Mr. Williams or Mr. Farrell as soon as possible to see if alternate arrangements are available.

**If you are planning on going to Camp Sawyer in May and want to go snorkeling with the troop you MUST take this test, if not you will not be able to go on the snorkeling excursion, this is for adults as well.**

**Due to limited space at Camp Sawyer we can only take a total of six adults on this trip.**

There will be an opportunity to take the test again at Tanah Keeta, but it will easier for you to take it in May.

If you have any questions please contact me,

YIS, Mr. Williams



# Tanah Keeta Summer Camp

It's that time of year again.

Time to sign up for  
Tanah Keeta Summer Camp on  
ScoutPay.

Week1: June 19th—24th

There are 4 different optional  
adventures available to those old  
enough and willing to participate.

If you have questions about whether  
you should be on a merit badge path  
or an advancement path this summer,  
talk with Mr. Williams or another ASM.

They will be happy to go over your  
options with you so that you have the  
best summer camp you can.

Notify Mr. Williams by 4/11/17 if you  
intend on attending!

**WHAT DO WE OFFER?**

- Phenomenal Staff
- Excellent Customer Service
- A True Scout-like Atmosphere
- Air Conditioned Dining Hall with First Class Food
- Every Campsite has Electricity, Latrines, Pavilions, and Plenty of Sand!
- Activities Tailored to YOUR Units Needs
- Over 75 Merit Badges Taught Weekly
- Top-notch First Year Camper Program
- GaGa Ball, Basketball, Volleyball and Soccer
- Evening Activity Themes
- Spacious Air Conditioned and Wifi Connected Leader's Lounge
- Nationally Accredited
- 4 NEW Specialty Adventures

**JOIN US ON ALL  
OF OUR NEW  
ADVENTURES!!!**

- TK Ocean Adventure
- Loxahatchee River Adventure
- TK Angler Adventure
- TK SCUBA Adventure(s)

**PLUS-** don't forget our  
TRADITIONAL BOY SCOUT  
SUMMER CAMP!!!

Can't get enough Tanah Keeta  
Adventure? **GO PRO!!!**  
Sign up to join our Provisional  
unit **TODAY!!!**



## Note about Health Forms

Health forms are only good for one year. This means that sections A, B, and C have to be completed by June 1st to attend Summer Camp. You will need duplicates if attending Camp Woodruff.

The following pages contain those forms. Here is the link if you would prefer to download them:

Summer Camp: [http://www.scouting.org/filestore/HealthSafety/pdf/680-001\\_ABC.pdf](http://www.scouting.org/filestore/HealthSafety/pdf/680-001_ABC.pdf)

If you are participating in other activities, such as SCUBA, please see the following link for additional heal forms:

<http://www.scouting.org/scoutsource/HealthandSafety/ahmr.aspx>

In addition, if doing COPE and Climbing, SCUBA, Snorkeling, etc, there are additional permission forms found on this page:

<https://www.gulfstreamcouncil.org/summer-camp>

## Part A: Informed Consent, Release Agreement, and Authorization

Full name: \_\_\_\_\_

DOB: \_\_\_\_\_

High-adventure base participants:

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

### 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: \_\_\_\_\_



## Part B: General Information/Health History

**Full name:** \_\_\_\_\_

**High-adventure base participants:**

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

**DOB:** \_\_\_\_\_

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.**



**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 (anginal)/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"/>	Meadles/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: \_\_\_\_\_



## Part C: Pre-Participation Physical

This part must be completed by certified and licensed physicians (MD, DO), nurse practitioners, or physician assistants.

Full name: \_\_\_\_\_

DOB: \_\_\_\_\_

### High-adventure base participants:

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

**!** You are being asked to certify that this individual has no contraindication for participation inside a Scouting experience. For individuals who will be attending a high-adventure program, including one of the national high-adventure bases, please refer to the supplemental information on the following pages or the form provided by your patient. **!**

Examiner: Please fill in the following information:

	Yes	No	Explain				
Medical restrictions to participate	<input type="checkbox"/>	<input type="checkbox"/>					
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	

Height (inches): \_\_\_\_\_ Weight (lbs.): \_\_\_\_\_ BMI: \_\_\_\_\_ Blood Pressure: \_\_\_\_\_ / \_\_\_\_\_ Pulse: \_\_\_\_\_

	Normal	Abnormal	Explain Abnormalities
Eyes	<input type="checkbox"/>	<input type="checkbox"/>	
Ears/nose/throat	<input type="checkbox"/>	<input type="checkbox"/>	
Lungs	<input type="checkbox"/>	<input type="checkbox"/>	
Heart	<input type="checkbox"/>	<input type="checkbox"/>	
Abdomen	<input type="checkbox"/>	<input type="checkbox"/>	
Genitalia/hernia	<input type="checkbox"/>	<input type="checkbox"/>	
Musculoskeletal	<input type="checkbox"/>	<input type="checkbox"/>	
Neurological	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	

### Examiner's Certification

I certify that I have reviewed the health history and examined this person and find no contraindications for participation in a Scouting experience. This participant (with noted restrictions):

True	False	Explain
<input type="checkbox"/>	<input type="checkbox"/>	Meets height/weight requirements.
<input type="checkbox"/>	<input type="checkbox"/>	Does not have uncontrolled heart disease, asthma, or hypertension.
<input type="checkbox"/>	<input type="checkbox"/>	Has not had an orthopedic injury, musculoskeletal problems, or orthopedic surgery in the last six months or possesses a letter of clearance from his or her orthopedic surgeon or treating physician.
<input type="checkbox"/>	<input type="checkbox"/>	Has no uncontrolled psychiatric disorders.
<input type="checkbox"/>	<input type="checkbox"/>	Has had no seizures in the last year.
<input type="checkbox"/>	<input type="checkbox"/>	Does not have poorly controlled diabetes.
<input type="checkbox"/>	<input type="checkbox"/>	If less than 18 years of age and planning to scuba dive, does not have diabetes, asthma, or seizures.
<input type="checkbox"/>	<input type="checkbox"/>	For high-adventure participants, I have reviewed with them the important supplemental risk advisory provided.

Examiner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Provider printed name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_

Office phone: \_\_\_\_\_

#### Height/Weight Restrictions

If you exceed the maximum weight for height as explained in the following chart and your planned high-adventure activity will take you more than 30 minutes away from an emergency vehicle/accessible roadway, you may not be allowed to participate.

Maximum weight for height:

Height (inches)	Max. Weight						
80	196	65	195	70	226	75	260
81	172	66	201	71	233	76	267
82	178	67	207	72	239	77	274
83	183	68	214	73	246	78	281
84	189	69	220	74	252	79 and over	295

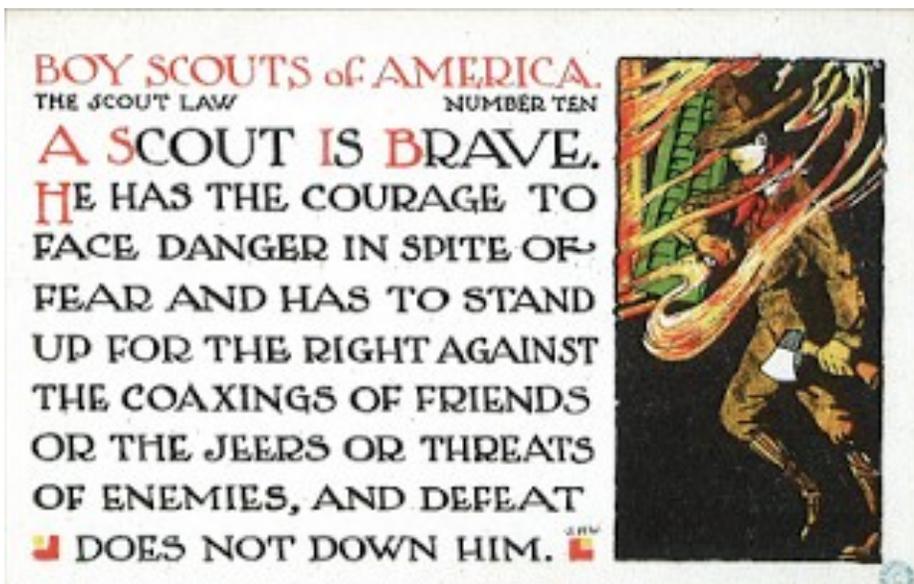




# TROOP 111 TRIBUNE

Newsorthy articles, dates, and other things

May 15th, 2017



A Scout is Brave: A Scout can face danger even if he is afraid. He stands for what is right even if others laugh at him.

5/16/17- Troop Meeting  
Class A

5/17/17- Round Table meeting 7pm

5/18/17- Swim Test- Royal Inn 8:30am

5/20/17- Eagle COH 4-6pm  
Mounts Botanical Gardens

5/21/17- Eagle COH 1pm @ Avanti's

5/23/17- Patrol Meeting  
Class B

5/26/17-5/29/17- Camp Sawyer- West  
Summerland Key

5/30/17- No Meeting

6/06/17- Troop Meeting  
Class A- Mandatory Parent Meeting for  
1st Time TK summer camp campers

6/13/17- Troop Meeting  
Class A

6/18/17-6/24/17- TK Summer Camp

6/27/17- Troop Meeting

Riddle: What did the quarterback say to the Scout troop?

Answer: Hike.



## In This Issue

- Eagle Courts of Honor- Chris Rice & Andrew Lange
- Swim Test Information- updated!
- Scout Scholarship Fund
- Camp Sawyer- deadline to sign up 5/19
- Note about communication
- Summer Camp Forms

# Eagle Courts of Honor 5/20 AND 5/21

## SAVE THE DATE!!!

**Eagles: Andrew Lange & Chris Rice are having their Eagle Courts of Honor**

Date: **Saturday May 20, 2017.**

Time: 4:00 -6:00 (roughly)

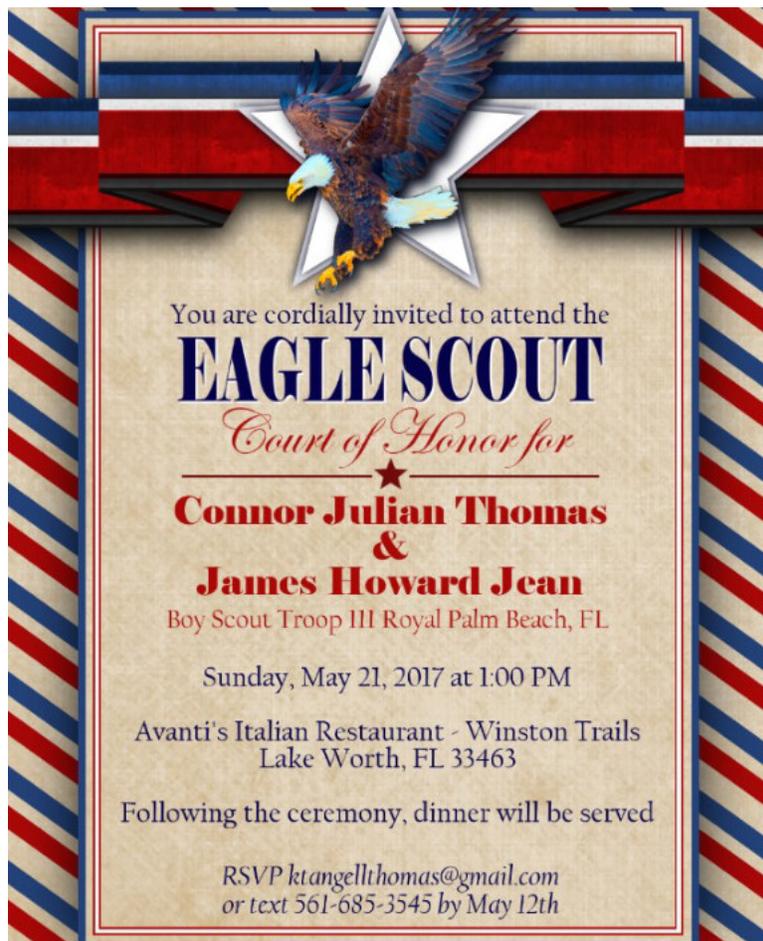
Location: Mounts Botanical Gardens

Chris and Andrew are having their Eagle Courts of Honor on Saturday May 20, 2017.

Come a little early to Tour the gardens. See Andrew and Chris's Eagle Projects at the Gardens, enjoy the Eagle Ceremony.

YES ---- Dinner will be served!

p.s. COH is on Scoutpay to help us keep track of numbers.



You are cordially invited to attend the  
**EAGLE SCOUT**  
*Court of Honor for*  
★  
**Connor Julian Thomas**  
&  
**James Howard Jean**  
Boy Scout Troop III Royal Palm Beach, FL

Sunday, May 21, 2017 at 1:00 PM

Avanti's Italian Restaurant - Winston Trails  
Lake Worth, FL 33463

Following the ceremony, dinner will be served

RSVP [ktangellthomas@gmail.com](mailto:ktangellthomas@gmail.com)  
or text 561-685-3545 by May 12th



## Note about communication

### Boy Scout Oath:

On my honor, I will do my best

To do my duty to God and my country and to obey the Scout Law;

To help other people at all times;

To keep myself physically strong, mentally awake and morally straight.

### Boy Scout Motto:

Be Prepared!

### Boy Scout Slogan:

Do a Good Turn Daily!



ScoutPay provides us all with an opportunity to sign up for events before they happen. Doing so as soon as possible makes it much easier to plan and coordinate with all of the families attending events like Cultural Diversity Day, Eagle Scout projects, and Courts of Honor.

For things like COH and Projects, there is no cost to RSVP via ScoutPay. Please utilize that tool to alert the troop of your intent to participate for these types of events so that everyone involved can plan accordingly.

Also, please don't be afraid to reply to an email that goes out in between newsletters with updates to ask questions or state your intent to participate in something. The sooner we know, the better prepared we can all be. After all, I think Be Prepared is the Boy Scout Motto, but I could be wrong.

If for any reason you need to get in touch with Mr. Williams, Mr. Lange, or Mr. Farrell, here are their email addresses:

Mr. Lange: darrell\_wpb@yahoo.com

Mr. Farrell: jgator97@yahoo.com

Mr. Williams: Williamspump@yahoo.com

## Mandatory Swim Test

We will giving the troop two opportunities to take the BSA swim test for Camp Sawyer and summer camps one on **Wednesday, May 24th** at 7:00 PM and one on Saturday, **May 20 at 8:30 AM** both will be held at the swimming pool at the Royal Inn, located at the corner of Southern Blvd. and RPB Blvd. If you cannot make one of these dates, contact Mr. Williams or Mr. Farrell as soon as possible to see if alternate arrangements are available.

**If you are planning on going to Camp Sawyer in May and want to go snorkeling with the troop you MUST take this test, if not you will not be able to go on the snorkeling excursion, this is for adults as well.**

**Due to limited space at Camp Sawyer we can only take a total of six adults on this trip.**

There will be an opportunity to take the test again at Tanah Keeta, but it will easier for you to take it in May.

If you have any questions please contact me,

YIS, Mr. Williams



# Scout Scholarship Fund– it's never too late to contribute

To all Troop 111 friends, family, and alumni,

As you may know our troop has always had the philosophy to allow any scout who wishes to camp to go, regardless of their ability to pay. To offset this expense we have always maintained a scholarship account, unfortunately that account has become depleted. I would like to ask for any of you who can afford it to make a small donation to our scholarship fund. Thanks to your generosity, many Scouts have attended summer camps and experienced things that they would not have been able to do without your support. Contrary to what you may have heard or been told about scholarships Tanah Keeta does not give out scholarships the only way we can subsidize our Scouts summer camp is through our Troop 111 scholarship fund. Remember that a small amount donated by many individuals can add up to a substantial amount and allow us to continue to let everyone experience the thrill of camping.

Please make checks payable to Troop111. In the memo box write -T111 Scholarship fund.

Ways to send checks:

1. Drop off at our meeting any Tuesday
2. Mail to me:  
Harold Williams  
119 Venetian Lane  
Royal Palm Beach, Fl. 33411
3. If neither of these ways work please call me 561-346-6891 and we can arrange for someone to pick up from you.

Thank you for your continued support of Troop 111– YIS- Mr. Williams

## Camp Sawyer– May 26-29 **Deadline to sign up 5/19!**

*Camp Jackson Sawyer at the Edward B. Knight Scout Reservation is a nine-acre Boy Scout of America camp site located in the Florida Keys. Flanked between the Gulf of Mexico and the Atlantic Ocean on Scout Key, Camp Sawyer offers primitive camping opportunities for Scouting units and other qualified community, service, and youth organizations. Camp Sawyer is complete with six beach-side, tent camping sites with campfires, a modern restroom facility, two covered pavilion spaces, an outdoor open-air amphitheater, a regulation-sized beach volleyball court, a seaside pier with ocean swimming, and plenty of outdoor activity space to provide an outstanding, camping experience.*

<http://www.campsawyer.org/aboutcampsawyer.html>

**Coming soon to ScoutPay! Extra special because it is Memorial Day weekend. That means 1 extra day of fun.**



# Notice about Stripe and ScoutPay

1. Please remember to sign-up as soon as possible for things such as diversity and Memorial Day events as examples. It is hard to plan logistics when these are events are not being replied to sooner.

2. STRIPE pay system reminder: Any amount under \$200, there will be a \$5.00 fee assessed. Over \$200, will be 3% of total.

Thank you,

Mr. Lange

# Raymond's Eagle Project Pictures



# Tanah Keeta Summer Camp

It's that time of year again.

Time to sign up for  
Tanah Keeta Summer Camp on  
ScoutPay.

Week1: June 19th—24th

There are 4 different optional adventures available to those old enough and willing to participate.

If you have questions about whether you should be on a merit badge path or an advancement path this summer, talk with Mr. Williams or another ASM.

They will be happy to go over your options with you so that you have the best summer camp you can.

Notify Mr. Williams by 4/11/17 if you intend on attending!



**WHAT DO WE OFFER?**

- Phenomenal Staff
- Excellent Customer Service
- A True Scout-like Atmosphere
- Air Conditioned Dining Hall with First Class Food
- Every Campsite has Electricity, Latrines, Pavilions, and Plenty of Sand!
- Activities Tailored to YOUR Units Needs
- Over 75 Merit Badges Taught Weekly
- Top-notch First Year Camper Program
- GaGa Ball, Basketball, Volleyball and Soccer
- Evening Activity Themes
- Spacious Air Conditioned and Wifi Connected Leader's Lounge
- Nationally Accredited
- 4 NEW Specialty Adventures



**JOIN US ON ALL OF OUR NEW ADVENTURES!!!**

-  TK Ocean Adventure
-  Loxahatchee River Adventure
-  TK Angler Adventure
-  TK SCUBA Adventure(s)

 **PLUS- don't forget our TRADITIONAL BOY SCOUT SUMMER CAMP!!!**

Can't get enough Tanah Keeta Adventure? **GO PRO!!!**  
Sign up to join our Provisional unit **TODAY!!!**



## Note about Health Forms

Health forms are only good for one year. This means that sections A, B, and C have to be completed by June 1st to attend Summer Camp. You will need duplicates if attending Camp Woodruff.

The following pages contain those forms. Here is the link if you would prefer to download them:

Summer Camp: [http://www.scouting.org/filestore/HealthSafety/pdf/680-001\\_ABC.pdf](http://www.scouting.org/filestore/HealthSafety/pdf/680-001_ABC.pdf)

If you are participating in other activities, such as SCUBA, please see the following link for additional health forms:

<http://www.scouting.org/scoutsource/HealthandSafety/ahmr.aspx>

In addition, if doing COPE and Climbing, SCUBA, Snorkeling, etc, there are additional permission forms found on this page:

<https://www.gulfstreamcouncil.org/summer-camp>

## Part A: Informed Consent, Release Agreement, and Authorization

Full name: \_\_\_\_\_

DOB: \_\_\_\_\_

High-adventure base participants:

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

### 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: \_\_\_\_\_

Telephone: \_\_\_\_\_

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

#### Adults NOT Authorized to Take Youth To and From Events:

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_



## Part B: General Information/Health History

**Full name:** \_\_\_\_\_

**High-adventure base participants:**

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

**DOB:** \_\_\_\_\_

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.**



**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 (anginal)/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"/>	Meadles/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: \_\_\_\_\_



## Part C: Pre-Participation Physical

This part must be completed by certified and licensed physicians (MD, DO), nurse practitioners, or physician assistants.

Full name: \_\_\_\_\_

DOB: \_\_\_\_\_

### High-adventure base participants:

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

**!** You are being asked to certify that this individual has no contraindication for participation inside a Scouting experience. For individuals who will be attending a high-adventure program, including one of the national high-adventure bases, please refer to the supplemental information on the following pages or the form provided by your patient. **!**

Examiner: Please fill in the following information:

	Yes	No	Explain	
Medical restrictions to participate	<input type="checkbox"/>	<input type="checkbox"/>		

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	

Height (inches): \_\_\_\_\_ Weight (lbs.): \_\_\_\_\_ BMI: \_\_\_\_\_ Blood Pressure: \_\_\_\_\_ / \_\_\_\_\_ Pulse: \_\_\_\_\_

	Normal	Abnormal	Explain Abnormalities
Eyes	<input type="checkbox"/>	<input type="checkbox"/>	
Ears/nose/throat	<input type="checkbox"/>	<input type="checkbox"/>	
Lungs	<input type="checkbox"/>	<input type="checkbox"/>	
Heart	<input type="checkbox"/>	<input type="checkbox"/>	
Abdomen	<input type="checkbox"/>	<input type="checkbox"/>	
Genitalia/hernia	<input type="checkbox"/>	<input type="checkbox"/>	
Musculoskeletal	<input type="checkbox"/>	<input type="checkbox"/>	
Neurological	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	

### Examiner's Certification

I certify that I have reviewed the health history and examined this person and find no contraindications for participation in a Scouting experience. This participant (with noted restrictions):

True	False	Explain
<input type="checkbox"/>	<input type="checkbox"/>	Meets height/weight requirements.
<input type="checkbox"/>	<input type="checkbox"/>	Does not have uncontrolled heart disease, asthma, or hypertension.
<input type="checkbox"/>	<input type="checkbox"/>	Has not had an orthopedic injury, musculoskeletal problems, or orthopedic surgery in the last six months or possesses a letter of clearance from his or her orthopedic surgeon or treating physician.
<input type="checkbox"/>	<input type="checkbox"/>	Has no uncontrolled psychiatric disorders.
<input type="checkbox"/>	<input type="checkbox"/>	Has had no seizures in the last year.
<input type="checkbox"/>	<input type="checkbox"/>	Does not have poorly controlled diabetes.
<input type="checkbox"/>	<input type="checkbox"/>	If less than 18 years of age and planning to scuba dive, does not have diabetes, asthma, or seizures.
<input type="checkbox"/>	<input type="checkbox"/>	For high-adventure participants, I have reviewed with them the important supplemental risk advisory provided.

Examiner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Provider printed name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_

Office phone: \_\_\_\_\_

#### Height/Weight Restrictions

If you exceed the maximum weight for height as explained in the following chart and your planned high-adventure activity will take you more than 30 minutes away from an emergency vehicle/accessible roadway, you may not be allowed to participate.

Maximum weight for height:

Height (inches)	Max. Weight						
80	196	65	195	70	226	75	260
81	172	66	201	71	233	76	267
82	178	67	207	72	239	77	274
83	183	68	214	73	246	78	281
84	189	69	220	74	252	79 and over	295



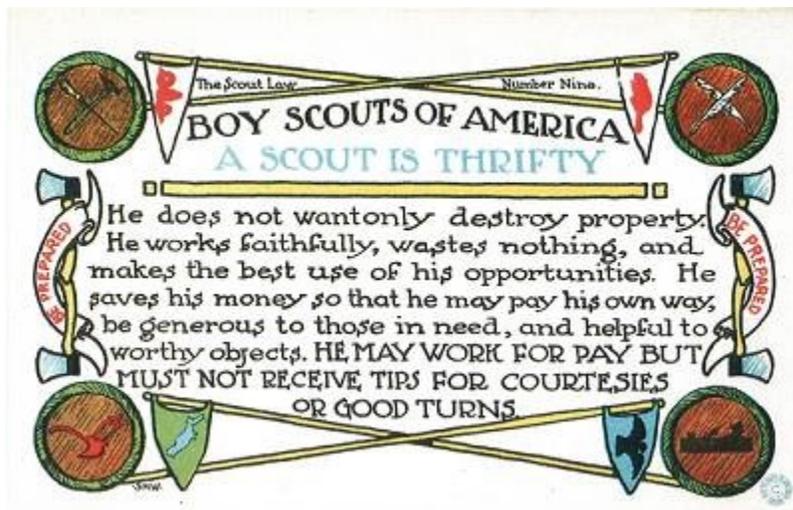
Prepared. For Life.®



# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

May 8th, 2017



A Scout is Thrifty: A Scout works to pay his way. He uses time, property, and natural resources wisely

5/9/17- Troop Meeting  
Class A

5/13/17- Raymond Brown- Eagle Scout Project- VA Medical Center  
8am-2pm

5/13/17- Cultural Diversity Day  
Starting at 1pm

5/16/17- Troop Meeting  
Class A

5/18/17- Swim Test- Royal Inn 6:30pm

5/18/17- Swim Test- Royal Inn 8:30am

5/20/17- Eagle COH 4-6pm  
Mounts Botanical Gardens

5/21/17- Eagle COH 1pm @ Avanti's

5/23/17- Patrol Meeting  
Class B

5/26/17-5/29/17- Camp Sawyer- West  
Summerland Key

5/30/17- No Meeting

Riddle: Where does Friday come before Thursday?

Answer: In the dictionary.



## In This Issue

- Eagle Courts of Honor- Chris Rice & Andrew Lange
- Swim Test Information
- Scout Scholarship Fund
- Camp Sawyer- coming soon!!!
- Quiet Waters Campout Wrapup
- Summer Camp Forms

# Eagle Courts of Honor 5/20 AND 5/21

## SAVE THE DATE!!!

**Eagles: Andrew Lange & Chris Rice are having their Eagle Courts of Honor**

Date: **Saturday May 20, 2017.**

Time: **4:00 -6:00 (roughly)**

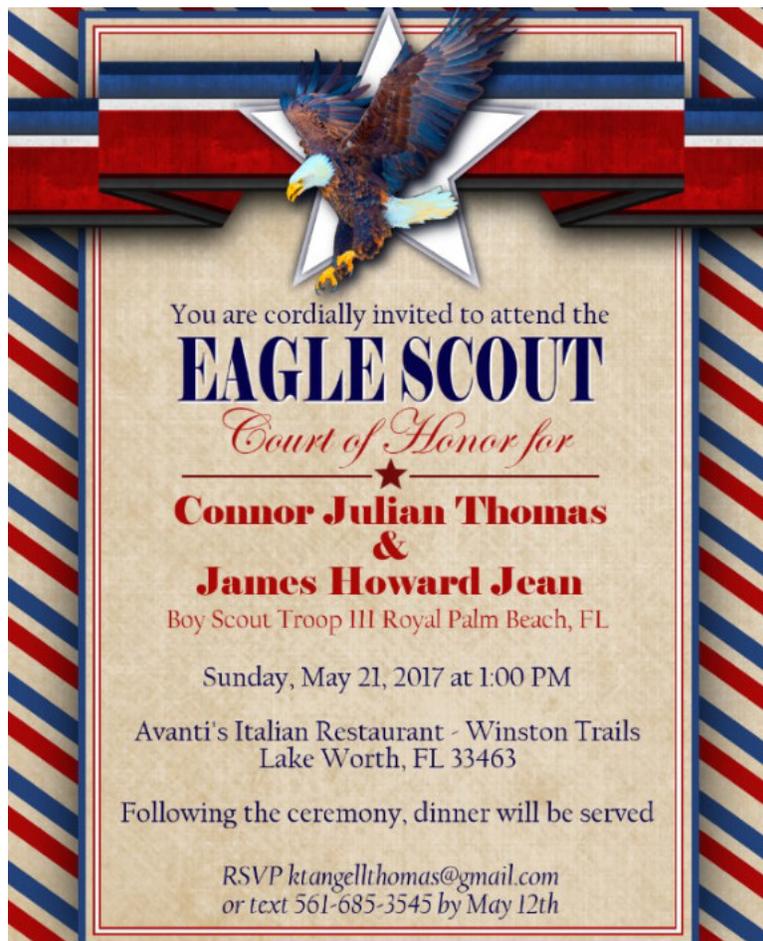
Location: **Mounts Botanical Gardens**

Chris and Andrew are having their Eagle Courts of Honor on Saturday May 20, 2017.

Come a little early to Tour the gardens. See Andrew and Chris's Eagle Projects at the Gardens, enjoy the Eagle Ceremony.

YES ---- Dinner will be served!

p.s. COH is on Scoutpay to help us keep track of numbers.



## Boy Scout Oath:

On my honor, I will do my best

To do my duty to God and my country and to obey the Scout Law;

To help other people at all times;

To keep myself physically strong, mentally awake and morally straight.

## Boy Scout Motto:

Be Prepared!

## Boy Scout Slogan:

Do a Good Turn Daily!



## Mandatory Swim Test

We will giving the troop two opportunities to take the BSA swim test for Camp Sawyer and summer camps one on Thursday, May 18 at 6:30 PM and one on Saturday, May 20 at 8:30 AM both will be held at the swimming pool at the Royal Inn, located at the corner of Southern Blvd. and RPB Blvd.

If you are planning on going to Camp Sawyer in May and want to go snorkeling with the troop you MUST take this test, if not you will not be able to go on the snorkeling excursion, this is for adults as well.

Due to limited space at Camp Sawyer we can only take a total of six adults on this trip.



# Scout Scholarship Fund– it's never too late to contribute

To all Troop 111 friends, family, and alumni,

As you may know our troop has always had the philosophy to allow any scout who wishes to camp to go, regardless of their ability to pay. To offset this expense we have always maintained a scholarship account, unfortunately that account has become depleted. I would like to ask for any of you who can afford it to make a small donation to our scholarship fund. Thanks to your generosity, many Scouts have attended summer camps and experienced things that they would not have been able to do without your support. Contrary to what you may have heard or been told about scholarships Tanah Keeta does not give out scholarships the only way we can subsidize our Scouts summer camp is through our Troop 111 scholarship fund. Remember that a small amount donated by many individuals can add up to a substantial amount and allow us to continue to let everyone experience the thrill of camping.

Please make checks payable to Troop111. In the memo box write -T111 Scholarship fund.

Ways to send checks:

1. Drop off at our meeting any Tuesday
2. Mail to me:  
Harold Williams  
119 Venetian Lane  
Royal Palm Beach, Fl. 33411

3. If neither of these ways work please call me 561-346-6891 and we can arrange for someone to pick up from you.

Thank you for your continued support of Troop 111– YIS- Mr. Williams

## Camp Sawyer– May 26-29

*Camp Jackson Sawyer at the Edward B. Knight Scout Reservation is a nine-acre Boy Scout of America camp site located in the Florida Keys. Flanked between the Gulf of Mexico and the Atlantic Ocean on Scout Key, Camp Sawyer offers primitive camping opportunities for Scouting units and other qualified community, service, and youth organizations. Camp Sawyer is complete with six beach-side, tent camping sites with campfires, a modern restroom facility, two covered pavilion spaces, an outdoor open-air amphitheater, a regulation-sized beach volleyball court, a seaside pier with ocean swimming, and plenty of outdoor activity space to provide an outstanding, camping experience.*

<http://www.campsawyer.org/aboutcampsawyer.html>

**Coming soon to ScoutPay! Extra special because it is Memorial Day weekend. That means 1 extra day of fun.**



# Cultural Diversity Day – 5/13/17

## 1:00 pm To Sundown Veterans Park in Royal Palm Beach

(Royal Palm Beach Boulevard and Sparrow Drive)

Featuring:  
Artists from Around The World

Showtime  
3:00 PM

- FOOD VENDORS
- DISPLAYS • DOMINOES
- BOUNCE HOUSE

EVERYONE  
IS INVITED  
EVENT IS  
FREE

Bring your chairs, blankets, tents  
and the entire family  
and be prepared to have a good time.

For More Information, contact:

Elet Cyris 561-791-9087 - Ernie Garvey 561-676-5664  
Village Of Royal Palm Beach Cultural Center at 561-790-5149  
or visit [www.cafcipbc.org](http://www.cafcipbc.org)

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The beauty  
of the world lies  
in the diversity  
of its people.

- Unknown



## Quiet Waters Campout Wrapup

Quiet Waters Campground is on a peninsula inside quiet Waters park, the troop arrived Friday around 7:00 PM and found that we had the entire campground to ourselves. Camp was promptly set up and for once it was not dark when completed. The weather cooperated and we had nice temperatures with a very stiff breeze and no bugs. After camp set up the troop had some leisure time to explore the campgrounds, followed by cracker barrel at 9:00 and lights out at 10PM.

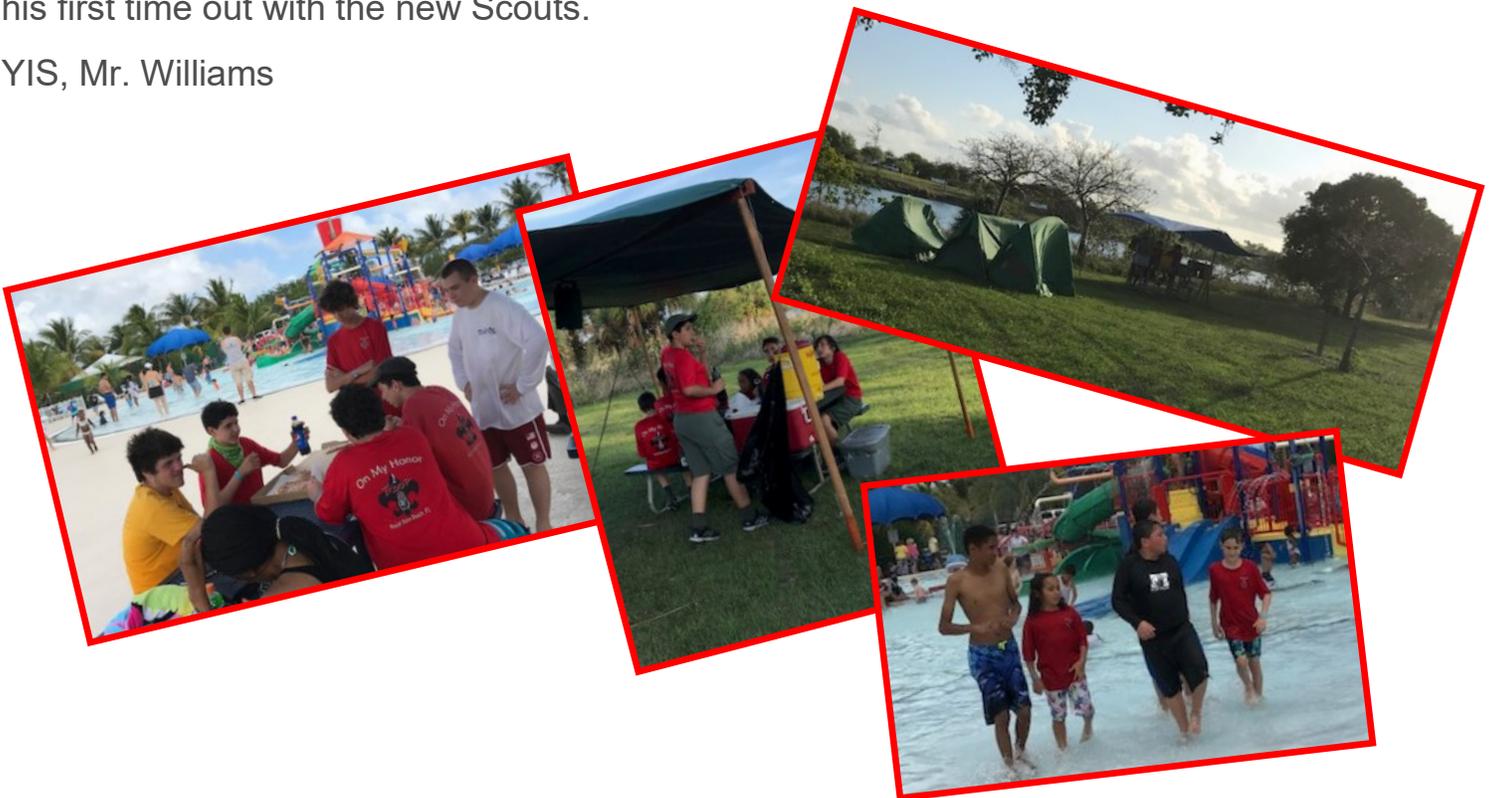
Saturday breakfast was completed by 9:00 AM followed by a hike thru the nature trail at Quiet Waters park, the troop returned to the campground and we spent the next several hours doing sign offs and arranging schedules for Camp Woodruff. We also found that the stiff breeze had increased to the point that we had to take down all of the dining flies and reset a few tents. After lunch the troop went to the water park and spent several hours hanging out there.

Dinner was breakfast for dinner and it seems that almost all of the patrols decided on pancakes, which proved to be quite difficult since the wind kept blowing out everyone's camp stove. Fortunately we had a substantial cracker barrel and the sitting bulls had plenty of extra food as usual. Dinner was followed by a fantastic campfire, emceed by Jacob White, who did an awesome job for his first time out. We also had several newer skits and songs which made it truly enjoyable. Lights out was again at 10:00 PM

Sunday everyone was up by 6:45, camp was broken down, breakfast was completed as well as Roses and Thorns all right on schedule.

A great job done by our Shaman this weekend, as well as both patrol leaders- Jared Lange and Ryan Goldberger and especially our new scout guide Jonathan Farrell who did fantastic his first time out with the new Scouts.

YIS, Mr. Williams



# Tanah Keeta Summer Camp

It's that time of year again.

Time to sign up for  
Tanah Keeta Summer Camp on  
ScoutPay.

**Week 1: June 19th—24th**

There are 4 different optional adventures available to those old enough and willing to participate.

If you have questions about whether you should be on a merit badge path or an advancement path this summer, talk with Mr. Williams or another ASM.

They will be happy to go over your options with you so that you have the best summer camp you can.

Notify Mr. Williams by 4/11/17 if you intend on attending!



**WHAT DO WE OFFER?**

- Phenomenal Staff
- Excellent Customer Service
- A True Scout-like Atmosphere
- Air Conditioned Dining Hall with First Class Food
- Every Campsite has Electricity, Latrines, Pavilions, and Plenty of Sand!
- Activities Tailored to YOUR Units Needs
- Over **75** Merit Badges Taught Weekly
- Top-notch First Year Camper Program
- GaGa Ball, Basketball, Volleyball and Soccer
- Evening Activity Themes
- Spacious Air Conditioned and Wifi Connected Leader's Lounge
- Nationally Accredited
- 4 NEW** Specialty Adventures



**JOIN US ON ALL OF OUR NEW ADVENTURES!!!**

-  TK Ocean Adventure
-  Loxahatchee River Adventure
-  TK Angler Adventure
-  TK SCUBA Adventure(s)

**PLUS-** don't forget our **TRADITIONAL BOY SCOUT SUMMER CAMP!!!**

Can't get enough Tanah Keeta Adventure? **GO PRO!!!**  
Sign up to join our Provisional unit **TODAY!!!**



## Note about Health Forms

Health forms are only good for one year. This means that sections A, B, and C have to be completed by June 1st to attend Summer Camp. You will need duplicates if attending Camp Woodruff.

The following pages contain those forms. Here is the link if you would prefer to download them:

Summer Camp: [http://www.scouting.org/filestore/HealthSafety/pdf/680-001\\_ABC.pdf](http://www.scouting.org/filestore/HealthSafety/pdf/680-001_ABC.pdf)

If you are participating in other activities, such as SCUBA, please see the following link for additional health forms:

<http://www.scouting.org/scoutsource/HealthandSafety/ahmr.aspx>

In addition, if doing COPE and Climbing, SCUBA, Snorkeling, etc, there are additional permission forms found on this page:

<https://www.gulfstreamcouncil.org/summer-camp>

## Part A: Informed Consent, Release Agreement, and Authorization

Full name: \_\_\_\_\_

DOB: \_\_\_\_\_

High-adventure base participants:

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

### 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: \_\_\_\_\_

Telephone: \_\_\_\_\_

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

#### Adults NOT Authorized to Take Youth To and From Events:

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_



## Part B: General Information/Health History

**Full name:** \_\_\_\_\_

**High-adventure base participants:**

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

**DOB:** \_\_\_\_\_

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.**



**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 (anginal)/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"/>	Meadles/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: \_\_\_\_\_



## Part C: Pre-Participation Physical

This part must be completed by certified and licensed physicians (MD, DO), nurse practitioners, or physician assistants.

Full name: \_\_\_\_\_

DOB: \_\_\_\_\_

### High-adventure base participants:

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

**!** You are being asked to certify that this individual has no contraindication for participation inside a Scouting experience. For individuals who will be attending a high-adventure program, including one of the national high-adventure bases, please refer to the supplemental information on the following pages or the form provided by your patient. **!**

Examiner: Please fill in the following information:

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

Height (inches): \_\_\_\_\_ Weight (lbs.): \_\_\_\_\_ BMI: \_\_\_\_\_ Blood Pressure: \_\_\_\_\_ / \_\_\_\_\_ Pulse: \_\_\_\_\_

	Normal	Abnormal	Explain Abnormalities
Eyes	<input type="checkbox"/>	<input type="checkbox"/>	
Ears/nose/throat	<input type="checkbox"/>	<input type="checkbox"/>	
Lungs	<input type="checkbox"/>	<input type="checkbox"/>	
Heart	<input type="checkbox"/>	<input type="checkbox"/>	
Abdomen	<input type="checkbox"/>	<input type="checkbox"/>	
Genitalia/hernia	<input type="checkbox"/>	<input type="checkbox"/>	
Musculoskeletal	<input type="checkbox"/>	<input type="checkbox"/>	
Neurological	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	

### Examiner's Certification

I certify that I have reviewed the health history and examined this person and find no contraindications for participation in a Scouting experience. This participant (with noted restrictions):

True	False	Explain
<input type="checkbox"/>	<input type="checkbox"/>	Meets height/weight requirements.
<input type="checkbox"/>	<input type="checkbox"/>	Does not have uncontrolled heart disease, asthma, or hypertension.
<input type="checkbox"/>	<input type="checkbox"/>	Has not had an orthopedic injury, musculoskeletal problems, or orthopedic surgery in the last six months or possesses a letter of clearance from his or her orthopedic surgeon or treating physician.
<input type="checkbox"/>	<input type="checkbox"/>	Has no uncontrolled psychiatric disorders.
<input type="checkbox"/>	<input type="checkbox"/>	Has had no seizures in the last year.
<input type="checkbox"/>	<input type="checkbox"/>	Does not have poorly controlled diabetes.
<input type="checkbox"/>	<input type="checkbox"/>	If less than 18 years of age and planning to scuba dive, does not have diabetes, asthma, or seizures.
<input type="checkbox"/>	<input type="checkbox"/>	For high-adventure participants, I have reviewed with them the important supplemental risk advisory provided.

Examiner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Provider printed name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_

Office phone: \_\_\_\_\_

#### Height/Weight Restrictions

If you exceed the maximum weight for height as explained in the following chart and your planned high-adventure activity will take you more than 30 minutes away from an emergency vehicle/accessible roadway, you may not be allowed to participate.

Maximum weight for height:

Height (inches)	Max. Weight						
80	196	65	195	70	226	75	260
81	172	66	201	71	233	76	267
82	178	67	207	72	239	77	274
83	183	68	214	73	246	78	281
84	189	69	220	74	252	79 and over	295



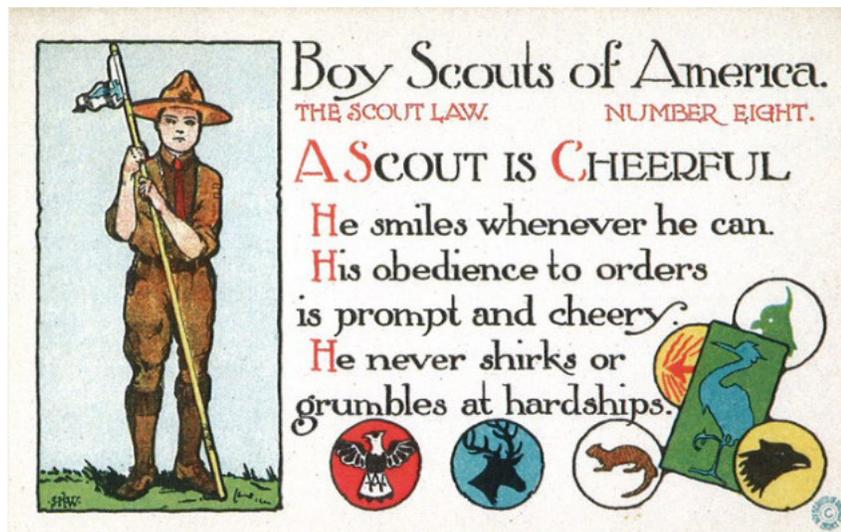
Prepared. For Life.®



# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

April 24th, 2017



A Scout is Cheerful: A Scout looks for the bright side of life. He cheerfully does tasks that come his way. He tries to make others happy.

4/25/17– Patrol Meeting

4/28/17-4/30/17– Quiet Waters Park Campout

5/2/17– PLC and Committee Meeting ClassB

5/5/17-5/7/17– OA Ordeal Tanah Keeta

5/6/17- Summer Camp Setup 8am-4pm

5/9/17- Troop Meeting Class A

5/13/17– Cultural Diversity Day

5/16/17- Troop Meeting Class A

5/20/17– Eagle COH 4-6pm Mounts Botanical Gardens

5/23/17– Patrol Meeting Class B

5/26/17-5/29/17– Camp Sawyer– West Summerland Key

Riddle: If there is a kidnaping at camp, what should you do?

Answer: Wake him up.



## In This Issue

- OA Sectionals Wrap-up
- Eagle Courts of Honor– Chris Rice & Andrew Lange
- Scout Scholarship Fund
- Summer Camp Forms
- Camp Sawyer– coming soon!!!

## Saturday 5/20/17 Mounts Botanical Gardens

### Boy Scout Oath:

On my honor, I will do my best

To do my duty to God and my country and to obey the Scout Law;

To help other people at all times;

To keep myself physically strong, mentally awake and morally straight.

### Boy Scout Motto:

Be Prepared!

### Boy Scout Slogan:

Do a Good Turn Daily!

Chris and Andrew are having their Eagle Courts of Honor on Saturday May 20, 2017 from roughly 4-6pm.

Come a little early to Tour the gardens. See Andrew and Chris's Eagle Projects at the Gardens, enjoy the Eagle Ceremony.

YES ---- Dinner will be served!

p.s. COH is on Scoutpay to help us keep track of numbers.



*Once an Eagle,  
Always an Eagle*

## OA Section Conference– Wrap-up

OA Section conference was held this past weekend at Sand Hill Scout Reservation in Brooksville, Florida. We had a fantastic weekend of training and brotherhood. Our local Aal-Pa-Tah lodge had over eighty members attend with eleven present and former members of our troop among them. All OA members mark you calendars now for next years conference April 13-15 2018 in Punta Gorda it will be an event not to miss.

YIS Mr. Williams



# Scout Scholarship Fund– it's never too late to contribute

To all Troop 111 friends, family, and alumni,

As you may know our troop has always had the philosophy to allow any scout who wishes to camp to go, regardless of their ability to pay. To offset this expense we have always maintained a scholarship account, unfortunately that account has become depleted. I would like to ask for any of you who can afford it to make a small donation to our scholarship fund. Thanks to your generosity, many Scouts have attended summer camps and experienced things that they would not have been able to do without your support. Contrary to what you may have heard or been told about scholarships Tanah Keeta does not give out scholarships the only way we can subsidize our Scouts summer camp is through our Troop 111 scholarship fund. Remember that a small amount donated by many individuals can add up to a substantial amount and allow us to continue to let everyone experience the thrill of camping.

Please make checks payable to Troop111. In the memo box write -T111 Scholarship fund.

Ways to send checks:

1. Drop off at our meeting any Tuesday
2. Mail to me:  
Harold Williams  
119 Venetian Lane  
Royal Palm Beach, Fl. 33411
3. If neither of these ways work please call me 561-346-6891 and we can arrange for someone to pick up from you.

Thank you for your continued support of Troop 111– YIS- Mr. Williams

## Camp Sawyer– May 26-29

*Camp Jackson Sawyer at the Edward B. Knight Scout Reservation is a nine-acre Boy Scout of America camp site located in the Florida Keys. Flanked between the Gulf of Mexico and the Atlantic Ocean on Scout Key, Camp Sawyer offers primitive camping opportunities for Scouting units and other qualified community, service, and youth organizations. Camp Sawyer is complete with six beach-side, tent camping sites with campfires, a modern restroom facility, two covered pavilion spaces, an outdoor open-air amphitheater, a regulation-sized beach volleyball court, a seaside pier with ocean swimming, and plenty of outdoor activity space to provide an outstanding, camping experience.*

<http://www.campsawyer.org/aboutcampsawyer.html>

**Coming soon to ScoutPay! Extra special because it is Memorial Day weekend. That means 1 extra day of fun.**



# Cultural Diversity Day— 5/13/17

Flag Ceremony details coming soon!



## 1:00 pm To Sundown Veterans Park in Royal Palm Beach

(Royal Palm Beach Boulevard and Sparrow Drive)

Featuring:  
Artists from Around The World

Showtime  
3:00 PM

- FOOD VENDORS
- DISPLAYS • DOMINOES
- BOUNCE HOUSE

EVERYONE  
IS INVITED  
EVENT IS  
FREE

Bring your chairs, blankets, tents and the entire family and be prepared to have a good time.



For More Information, contact:  
Elet Cyris 561-791-9087 - Ernie Garvey 561-676-5664  
Village Of Royal Palm Beach Cultural Center at 561-790-5149  
or visit [www.cafcipbc.org](http://www.cafcipbc.org)

SPONSORED BY:



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## Camp Woodruff Reminder

To everyone attending Camp Woodruff or who may attend Woodruff, please read thru the attachment to this e-mail and select your courses. Please have your schedule ready for Mr. Farrell on Tuesday night. Also note that everyone attending gets to participate in one off site activity either White water rafting or horseback riding. If you are going to do one of these you must adjust the rest of your courses accordingly. Any questions see me on Tuesday,

YIS, Mr. Williams



# Tanah Keeta Summer Camp

It's that time of year again.

Time to sign up for  
Tanah Keeta Summer Camp on  
ScoutPay.

Week1: June 19th—24th

There are 4 different optional  
adventures available to those old  
enough and willing to participate.

If you have questions about whether  
you should be on a merit badge path  
or an advancement path this summer,  
talk with Mr. Williams or another ASM.

They will be happy to go over your  
options with you so that you have the  
best summer camp you can.

Notify Mr. Williams by 4/11/17 if you  
intend on attending!



**WHAT DO WE OFFER?**

- Phenomenal Staff
- Excellent Customer Service
- A True Scout-like Atmosphere
- Air Conditioned Dining Hall with First Class Food
- Every Campsite has Electricity, Latrines, Pavilions, and Plenty of Sand!
- Activities Tailored to YOUR Units Needs
- Over 75 Merit Badges Taught Weekly
- Top-notch First Year Camper Program
- GaGa Ball, Basketball, Volleyball and Soccer
- Evening Activity Themes
- Spacious Air Conditioned and Wifi Connected Leader's Lounge
- Nationally Accredited
- 4 NEW Specialty Adventures



**JOIN US ON ALL  
OF OUR NEW  
ADVENTURES!!!**

-  TK Ocean Adventure
-  Loxahatchee River Adventure
-  TK Angler Adventure
-  TK SCUBA Adventure(s)

 **PLUS- don't forget our  
TRADITIONAL BOY SCOUT  
SUMMER CAMP!!!**

Can't get enough Tanah Keeta  
Adventure? **GO PRO!!!**  
Sign up to join our Provisional  
unit **TODAY!!!**



## Note about Health Forms

Health forms are only good for one year. This means that sections A, B, and C have to be completed by June 1st to attend Summer Camp. You will need duplicates if attending Camp Woodruff.

The following pages contain those forms. Here is the link if you would prefer to download them:

Summer Camp: [http://www.scouting.org/filestore/HealthSafety/pdf/680-001\\_ABC.pdf](http://www.scouting.org/filestore/HealthSafety/pdf/680-001_ABC.pdf)

If you are participating in other activities, such as SCUBA, please see the following link for additional health forms:

<http://www.scouting.org/scoutsource/HealthandSafety/ahmr.aspx>

In addition, if doing COPE and Climbing, SCUBA, Snorkeling, etc, there are additional permission forms found on this page:

<https://www.gulfstreamcouncil.org/summer-camp>

## Part A: Informed Consent, Release Agreement, and Authorization

Full name: \_\_\_\_\_

DOB: \_\_\_\_\_

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

### 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: \_\_\_\_\_  
 Telephone: \_\_\_\_\_

Name: \_\_\_\_\_  
 Telephone: \_\_\_\_\_

#### Adults NOT Authorized to Take Youth To and From Events:

Name: \_\_\_\_\_  
 Telephone: \_\_\_\_\_

Name: \_\_\_\_\_  
 Telephone: \_\_\_\_\_



## Part B: General Information/Health History

**Full name:** \_\_\_\_\_

**High-adventure base participants:**

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

**DOB:** \_\_\_\_\_

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.**



**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 (anginal)/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"/>	Meadles/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: \_\_\_\_\_



## Part C: Pre-Participation Physical

This part must be completed by certified and licensed physicians (MD, DO), nurse practitioners, or physician assistants.

Full name: \_\_\_\_\_

DOB: \_\_\_\_\_

### High-adventure base participants:

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

**!** You are being asked to certify that this individual has no contraindication for participation inside a Scouting experience. For individuals who will be attending a high-adventure program, including one of the national high-adventure bases, please refer to the supplemental information on the following pages or the form provided by your patient. **!**

Examiner: Please fill in the following information:

	Yes	No	Explain	
Medical restrictions to participate	<input type="checkbox"/>	<input type="checkbox"/>		

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	

Height (inches): \_\_\_\_\_ Weight (lbs.): \_\_\_\_\_ BMI: \_\_\_\_\_ Blood Pressure: \_\_\_\_\_ / \_\_\_\_\_ Pulse: \_\_\_\_\_

	Normal	Abnormal	Explain Abnormalities
Eyes	<input type="checkbox"/>	<input type="checkbox"/>	
Ears/nose/throat	<input type="checkbox"/>	<input type="checkbox"/>	
Lungs	<input type="checkbox"/>	<input type="checkbox"/>	
Heart	<input type="checkbox"/>	<input type="checkbox"/>	
Abdomen	<input type="checkbox"/>	<input type="checkbox"/>	
Genitalia/hernia	<input type="checkbox"/>	<input type="checkbox"/>	
Musculoskeletal	<input type="checkbox"/>	<input type="checkbox"/>	
Neurological	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	

### Examiner's Certification

I certify that I have reviewed the health history and examined this person and find no contraindications for participation in a Scouting experience. This participant (with noted restrictions):

True	False	Explain
<input type="checkbox"/>	<input type="checkbox"/>	Meets height/weight requirements.
<input type="checkbox"/>	<input type="checkbox"/>	Does not have uncontrolled heart disease, asthma, or hypertension.
<input type="checkbox"/>	<input type="checkbox"/>	Has not had an orthopedic injury, musculoskeletal problems, or orthopedic surgery in the last six months or possesses a letter of clearance from his or her orthopedic surgeon or treating physician.
<input type="checkbox"/>	<input type="checkbox"/>	Has no uncontrolled psychiatric disorders.
<input type="checkbox"/>	<input type="checkbox"/>	Has had no seizures in the last year.
<input type="checkbox"/>	<input type="checkbox"/>	Does not have poorly controlled diabetes.
<input type="checkbox"/>	<input type="checkbox"/>	If less than 18 years of age and planning to scuba dive, does not have diabetes, asthma, or seizures.
<input type="checkbox"/>	<input type="checkbox"/>	For high-adventure participants, I have reviewed with them the important supplemental risk advisory provided.

Examiner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Provider printed name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_

Office phone: \_\_\_\_\_

#### Height/Weight Restrictions

If you exceed the maximum weight for height as explained in the following chart and your planned high-adventure activity will take you more than 30 minutes away from an emergency vehicle/accessible roadway, you may not be allowed to participate.

Maximum weight for height:

Height (inches)	Max. Weight						
80	196	65	195	70	226	75	260
81	172	66	201	71	233	76	267
82	178	67	207	72	239	77	274
83	183	68	214	73	246	78	281
84	189	69	220	74	252	79 and over	295





# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

April 17th, 2017

## Knots LAW: OBEDIENT



A Scout is Obedient: A Scout follows the rules of his family, school, and pack. He obeys the laws of his community and country.

4/18/17– Troop Meeting  
Class B

4/21/17-4/23/17– Order of the Arrow  
Section Conference

4/25/17– Patrol Meeting

4/28/17-4/30/17– Quiet Waters Park  
Campout

5/2/17– PLC and Committee Meeting  
ClassB

5/5/17-5/7/17– OA Ordeal  
Tanah Keeta

5/6/17- Summer Camp Setup  
8am-4pm

5/9/17- Troop Meeting  
Class A

5/13/17– Cultural Diversity Day

5/16/17- Troop Meeting  
Class A

5/20/17– Eagle COH 4-6pm  
Mounts Botanical Gardens

Riddle: How do you make a fire lighter?

Answer: Take off one log



## In This Issue

- OA Sectionals Coming Soon
- Eagle Courts of Honor– Chris Rice & Andrew Lange
- Scout Scholarship Fund
- Summer Camp Forms
- Merit Badge Counselor Opportunity

## Saturday 5/20/17 Mounts Botanical Gardens

### Boy Scout Oath:

On my honor, I will do my best

To do my duty to God and my country and to obey the Scout Law;

To help other people at all times;

To keep myself physically strong, mentally awake and morally straight.

### Boy Scout Motto:

Be Prepared!

### Boy Scout Slogan:

Do a Good Turn Daily!

Chris and Andrew are having their Eagle Courts of Honor on Saturday May 20, 2017 from roughly 4-6pm.

Come a little early to Tour the gardens. See Andrew and Chris's Eagle Projects at the Gardens, enjoy the Eagle Ceremony.

YES ---- Dinner will be served!

p.s. COH is on Scoutpay to help us keep track of numbers.



*Once an Eagle,  
Always an Eagle*

## OA Section Conference

The Order of the Arrow Section Conference is coming up on April 21st. According to the Gulfstream Council's website, the location is yet to be determined, but is on the calendar. Be sure to stay tuned to future newsletters for updates, or check for yourself at the following link:

[https://www.gulfstreamcouncil.org/OA\\_Section\\_Conf17](https://www.gulfstreamcouncil.org/OA_Section_Conf17)



*Brotherhood*

# Scout Scholarship Fund

To all Troop 111 friends, family, and alumni,

As you may know our troop has always had the philosophy to allow any scout who wishes to camp to go, regardless of their ability to pay. To offset this expense we have always maintained a scholarship account, unfortunately that account has become depleted. I would like to ask for any of you who can afford it to make a small donation to our scholarship fund. Thanks to your generosity, many Scouts have attended summer camps and experienced things that they would not have been able to do without your support. Contrary to what you may have heard or been told about scholarships Tanah Keeta does not give out scholarships the only way we can subsidize our Scouts summer camp is through our Troop 111 scholarship fund. Remember that a small amount donated by many individuals can add up to a substantial amount and allow us to continue to let everyone experience the thrill of camping.

Please make checks payable to Troop111. In the memo box write -T111 Scholarship fund.

Ways to send checks:

1. Drop off at our meeting any Tuesday
2. Mail to me:  
Harold Williams  
119 Venetian Lane  
Royal Palm Beach, Fl. 33411
3. If neither of these ways work please call me 561-346-6891 and we can arrange for someone to pick up from you.

Thank you for your continued support of Troop 111– YIS- Mr. Williams

## Merit Badge Counselor Training– 4/19/17

Please join us at Lighthouse District Roundtable

for the most important Function of the District. If you have never been, come see what all the excitement is about at Roundtable.

**Who is Roundtable for?** All units-leaders and parents, Charter Representatives, Commissioners and anyone else who would like to come.

**Where?** We meet at Grove Park Elementary School ( [8330 N Military Trail, West Palm Beach, FL 33410](#)) which is right across the road from Gulf Stream Council & Scout Store. On Military Trail road just south of North Lake Blvd.

**When:** Wednesday, 04/19/2017, Roundtable will be on the 3rd week of the month.

**Time:** 6:45-8:30PM ( We start Promptly at 7:00PM)

**What to bring:** Please bring someone from your unit who has never been to Roundtable and earn an extra 2 tickets, This months Roundtable Theme is Let's Go Fishing bring a seafood dish or something that goes along with fish and shrimp. Bring a treat to share and earn an extra ticket. Everyone who arrives before 7:00PM will earn their first ticket. We have all kinds of items to giveaway so earn those tickets and have a greater chance to winning. Sodas and waters are on sale for \$1.00.

**What is happening at Roundtable:** We have Merit Badge Counselor Training for anyone who wants to become a Merit Badge Counselor.

**If you need to be on the agenda** please email me by Monday, 4/17/2017.

Yours in Scouting

Mrs. Barbara Mayer

**(Please reach out to Mr. Williams if you are interested or have questions.)**

# Cultural Diversity Day— 5/13/17

Flag Ceremony details coming soon!



## 1:00 pm To Sundown Veterans Park in Royal Palm Beach

(Royal Palm Beach Boulevard and Sparrow Drive)

Featuring:  
Artists from Around The World

Showtime  
3:00 PM

EVERYONE  
IS INVITED  
EVENT IS  
FREE

- FOOD VENDORS
- DISPLAYS • DOMINOES
- BOUNCE HOUSE

Bring your chairs, blankets, tents and the entire family and be prepared to have a good time.

For More Information, contact:

Elet Cyris 561-791-9087 - Ernie Garvey 561-676-5664  
Village Of Royal Palm Beach Cultural Center at 561-790-5149  
or visit [www.cafcipbc.org](http://www.cafcipbc.org)

SPONSORED BY:



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REAL NEWS STARTS HERE



Thanks Mrs. Fearon for the great link about Merit Badge sashes. This is a great refresher for more seasoned scouts, and excellent information for newer scouts.

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# Tanah Keeta Summer Camp

It's that time of year again.

Time to sign up for  
Tanah Keeta Summer Camp on  
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Week1: June 19th—24th

There are 4 different optional  
adventures available to those old  
enough and willing to participate.

If you have questions about whether  
you should be on a merit badge path  
or an advancement path this summer,  
talk with Mr. Williams or another ASM.

They will be happy to go over your  
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best summer camp you can.

Notify Mr. Williams by 4/11/17 if you  
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- Activities Tailored to YOUR Units Needs
- Over 75 Merit Badges Taught Weekly
- Top-notch First Year Camper Program
- GaGa Ball, Basketball, Volleyball and Soccer
- Evening Activity Themes
- Spacious Air Conditioned and Wifi Connected Leader's Lounge
- Nationally Accredited
- 4 NEW Specialty Adventures

**JOIN US ON ALL  
OF OUR NEW  
ADVENTURES!!!**

- TK Ocean Adventure
- Loxahatchee River Adventure
- TK Angler Adventure
- TK SCUBA Adventure(s)

**PLUS-** don't forget our  
TRADITIONAL BOY SCOUT  
SUMMER CAMP!!!

Can't get enough Tanah Keeta  
Adventure? **GO PRO!!!**  
Sign up to join our Provisional  
unit **TODAY!!!**



## Note about Health Forms

Health forms are only good for one year. This means that sections A, B, and C have to be completed by June 1st to attend Summer Camp. You will need duplicates if attending Camp Woodruff.

The following pages contain those forms. Here is the link if you would prefer to download them:

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If you are participating in other activities, such as SCUBA, please see the following link for additional health forms:

<http://www.scouting.org/scoutsource/HealthandSafety/ahmr.aspx>

In addition, if doing COPE and Climbing, SCUBA, Snorkeling, etc, there are additional permission forms found on this page:

<https://www.gulfstreamcouncil.org/summer-camp>

## Part A: Informed Consent, Release Agreement, and Authorization

Full name: \_\_\_\_\_

DOB: \_\_\_\_\_

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

### 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: \_\_\_\_\_  
 Telephone: \_\_\_\_\_

Name: \_\_\_\_\_  
 Telephone: \_\_\_\_\_

#### Adults NOT Authorized to Take Youth To and From Events:

Name: \_\_\_\_\_  
 Telephone: \_\_\_\_\_

Name: \_\_\_\_\_  
 Telephone: \_\_\_\_\_



## Part B: General Information/Health History

**Full name:** \_\_\_\_\_

**High-adventure base participants:**

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

**DOB:** \_\_\_\_\_

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.**



**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 (anginal)/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"/>	Meadles/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: \_\_\_\_\_



## Part C: Pre-Participation Physical

This part must be completed by certified and licensed physicians (MD, DO), nurse practitioners, or physician assistants.

Full name: \_\_\_\_\_

DOB: \_\_\_\_\_

### High-adventure base participants:

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

**!** You are being asked to certify that this individual has no contraindication for participation inside a Scouting experience. For individuals who will be attending a high-adventure program, including one of the national high-adventure bases, please refer to the supplemental information on the following pages or the form provided by your patient. **!**

Examiner: Please fill in the following information:

	Yes	No	Explain	
Medical restrictions to participate	<input type="checkbox"/>	<input type="checkbox"/>		

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	

Height (inches): \_\_\_\_\_ Weight (lbs.): \_\_\_\_\_ BMI: \_\_\_\_\_ Blood Pressure: \_\_\_\_\_ / \_\_\_\_\_ Pulse: \_\_\_\_\_

	Normal	Abnormal	Explain Abnormalities
Eyes	<input type="checkbox"/>	<input type="checkbox"/>	
Ears/nose/throat	<input type="checkbox"/>	<input type="checkbox"/>	
Lungs	<input type="checkbox"/>	<input type="checkbox"/>	
Heart	<input type="checkbox"/>	<input type="checkbox"/>	
Abdomen	<input type="checkbox"/>	<input type="checkbox"/>	
Genitalia/hernia	<input type="checkbox"/>	<input type="checkbox"/>	
Musculoskeletal	<input type="checkbox"/>	<input type="checkbox"/>	
Neurological	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	

### Examiner's Certification

I certify that I have reviewed the health history and examined this person and find no contraindications for participation in a Scouting experience. This participant (with noted restrictions):

True	False	Explain
<input type="checkbox"/>	<input type="checkbox"/>	Meets height/weight requirements.
<input type="checkbox"/>	<input type="checkbox"/>	Does not have uncontrolled heart disease, asthma, or hypertension.
<input type="checkbox"/>	<input type="checkbox"/>	Has not had an orthopedic injury, musculoskeletal problems, or orthopedic surgery in the last six months or possesses a letter of clearance from his or her orthopedic surgeon or treating physician.
<input type="checkbox"/>	<input type="checkbox"/>	Has no uncontrolled psychiatric disorders.
<input type="checkbox"/>	<input type="checkbox"/>	Has had no seizures in the last year.
<input type="checkbox"/>	<input type="checkbox"/>	Does not have poorly controlled diabetes.
<input type="checkbox"/>	<input type="checkbox"/>	If less than 18 years of age and planning to scuba dive, does not have diabetes, asthma, or seizures.
<input type="checkbox"/>	<input type="checkbox"/>	For high-adventure participants, I have reviewed with them the important supplemental risk advisory provided.

Examiner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Provider printed name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_

Office phone: \_\_\_\_\_

#### Height/Weight Restrictions

If you exceed the maximum weight for height as explained in the following chart and your planned high-adventure activity will take you more than 30 minutes away from an emergency vehicle/accessible roadway, you may not be allowed to participate.

Maximum weight for height:

Height (inches)	Max. Weight						
80	196	65	195	70	226	75	260
81	172	66	201	71	233	76	267
82	178	67	207	72	239	77	274
83	183	68	214	73	246	78	281
84	189	69	220	74	252	79 and over	295



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# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

April 17th, 2017

## Knots LAW: OBEDIENT



A Scout is Obedient: A Scout follows the rules of his family, school, and pack. He obeys the laws of his community and country.

4/18/17– Troop Meeting  
Class B

4/21/17-4/23/17– Order of the Arrow  
Section Conference

4/25/17– Patrol Meeting

4/28/17-4/30/17– Quiet Waters Park  
Campout

5/2/17– PLC and Committee Meeting  
ClassB

5/5/17-5/7/17– OA Ordeal  
Tanah Keeta

5/6/17- Summer Camp Setup  
8am-4pm

5/9/17- Troop Meeting  
Class A

5/13/17– Cultural Diversity Day

5/16/17- Troop Meeting  
Class A

5/20/17– Eagle COH 4-6pm  
Mounts Botanical Gardens

Riddle: How do you make a fire lighter?

Answer: Take off one log



## In This Issue

- OA Sectionals Coming Soon
- Eagle Courts of Honor– Chris Rice & Andrew Lange
- Scout Scholarship Fund
- Summer Camp Forms
- Merit Badge Counselor Opportunity

## Saturday 5/20/17 Mounts Botanical Gardens

### Boy Scout Oath:

On my honor, I will do my best

To do my duty to God and my country and to obey the Scout Law;

To help other people at all times;

To keep myself physically strong, mentally awake and morally straight.

### Boy Scout Motto:

Be Prepared!

### Boy Scout Slogan:

Do a Good Turn Daily!

Chris and Andrew are having their Eagle Courts of Honor on Saturday May 20, 2017 from roughly 4-6pm.

Come a little early to Tour the gardens. See Andrew and Chris's Eagle Projects at the Gardens, enjoy the Eagle Ceremony.

YES ---- Dinner will be served!

p.s. COH is on Scoutpay to help us keep track of numbers.



*Once an Eagle,  
Always an Eagle*

## OA Section Conference

The Order of the Arrow Section Conference is coming up on April 21st. According to the Gulfstream Council's website, the location is yet to be determined, but is on the calendar. Be sure to stay tuned to future newsletters for updates, or check for yourself at the following link:

[https://www.gulfstreamcouncil.org/OA\\_Section\\_Conf17](https://www.gulfstreamcouncil.org/OA_Section_Conf17)



*Brotherhood*

# Scout Scholarship Fund

To all Troop 111 friends, family, and alumni,

As you may know our troop has always had the philosophy to allow any scout who wishes to camp to go, regardless of their ability to pay. To offset this expense we have always maintained a scholarship account, unfortunately that account has become depleted. I would like to ask for any of you who can afford it to make a small donation to our scholarship fund. Thanks to your generosity, many Scouts have attended summer camps and experienced things that they would not have been able to do without your support. Contrary to what you may have heard or been told about scholarships Tanah Keeta does not give out scholarships the only way we can subsidize our Scouts summer camp is through our Troop 111 scholarship fund. Remember that a small amount donated by many individuals can add up to a substantial amount and allow us to continue to let everyone experience the thrill of camping.

Please make checks payable to Troop111. In the memo box write -T111 Scholarship fund.

Ways to send checks:

1. Drop off at our meeting any Tuesday
2. Mail to me:  
Harold Williams  
119 Venetian Lane  
Royal Palm Beach, Fl. 33411
3. If neither of these ways work please call me 561-346-6891 and we can arrange for someone to pick up from you.

Thank you for your continued support of Troop 111– YIS- Mr. Williams

## Merit Badge Counselor Training– 4/19/17

Please join us at Lighthouse District Roundtable

for the most important Function of the District. If you have never been, come see what all the excitement is about at Roundtable.

**Who is Roundtable for?** All units-leaders and parents, Charter Representatives, Commissioners and anyone else who would like to come.

**Where?** We meet at Grove Park Elementary School ( [8330 N Military Trail, West Palm Beach, FL 33410](#)) which is right across the road from Gulf Stream Council & Scout Store. On Military Trail road just south of North Lake Blvd.

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**Time:** 6:45-8:30PM ( We start Promptly at 7:00PM)

**What to bring:** Please bring someone from your unit who has never been to Roundtable and earn an extra 2 tickets, This months Roundtable Theme is Let's Go Fishing bring a seafood dish or something that goes along with fish and shrimp. Bring a treat to share and earn an extra ticket. Everyone who arrives before 7:00PM will earn their first ticket. We have all kinds of items to giveaway so earn those tickets and have a greater chance to winning. Sodas and waters are on sale for \$1.00.

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**If you need to be on the agenda** please email me by Monday, 4/17/2017.

Yours in Scouting

Mrs. Barbara Mayer

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Flag Ceremony details coming soon!



## 1:00 pm To Sundown Veterans Park in Royal Palm Beach

(Royal Palm Beach Boulevard and Sparrow Drive)

Featuring:  
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Showtime  
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- DISPLAYS • DOMINOES
- BOUNCE HOUSE

EVERYONE  
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EVENT IS  
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REAL NEWS STARTS HERE



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TK Angler Adventure



TK SCUBA Adventure(s)



**PLUS-** don't forget our TRADITIONAL BOY SCOUT SUMMER CAMP!!!

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If you are participating in other activities, such as SCUBA, please see the following link for additional health forms:

<http://www.scouting.org/scoutsource/HealthandSafety/ahmr.aspx>

In addition, if doing COPE and Climbing, SCUBA, Snorkeling, etc, there are additional permission forms found on this page:

<https://www.gulfstreamcouncil.org/summer-camp>

## Part A: Informed Consent, Release Agreement, and Authorization

Full name: \_\_\_\_\_

DOB: \_\_\_\_\_

High-adventure base participants:

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

### 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: \_\_\_\_\_



## Part B: General Information/Health History

**Full name:** \_\_\_\_\_

**High-adventure base participants:**

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

**DOB:** \_\_\_\_\_

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.**



**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 (anginal)/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"/>	Meadles/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: \_\_\_\_\_



## Part C: Pre-Participation Physical

This part must be completed by certified and licensed physicians (MD, DO), nurse practitioners, or physician assistants.

Full name: \_\_\_\_\_

DOB: \_\_\_\_\_

### High-adventure base participants:

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

**!** You are being asked to certify that this individual has no contraindication for participation inside a Scouting experience. For individuals who will be attending a high-adventure program, including one of the national high-adventure bases, please refer to the supplemental information on the following pages or the form provided by your patient. **!**

Examiner: Please fill in the following information:

	Yes	No	Explain	
Medical restrictions to participate	<input type="checkbox"/>	<input type="checkbox"/>		

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	

Height (inches): \_\_\_\_\_ Weight (lbs.): \_\_\_\_\_ BMI: \_\_\_\_\_ Blood Pressure: \_\_\_\_\_ / \_\_\_\_\_ Pulse: \_\_\_\_\_

	Normal	Abnormal	Explain Abnormalities
Eyes	<input type="checkbox"/>	<input type="checkbox"/>	
Ears/nose/throat	<input type="checkbox"/>	<input type="checkbox"/>	
Lungs	<input type="checkbox"/>	<input type="checkbox"/>	
Heart	<input type="checkbox"/>	<input type="checkbox"/>	
Abdomen	<input type="checkbox"/>	<input type="checkbox"/>	
Genitalia/hernia	<input type="checkbox"/>	<input type="checkbox"/>	
Musculoskeletal	<input type="checkbox"/>	<input type="checkbox"/>	
Neurological	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	

### Examiner's Certification

I certify that I have reviewed the health history and examined this person and find no contraindications for participation in a Scouting experience. This participant (with noted restrictions):

True	False	Explain
<input type="checkbox"/>	<input type="checkbox"/>	Meets height/weight requirements.
<input type="checkbox"/>	<input type="checkbox"/>	Does not have uncontrolled heart disease, asthma, or hypertension.
<input type="checkbox"/>	<input type="checkbox"/>	Has not had an orthopedic injury, musculoskeletal problems, or orthopedic surgery in the last six months or possesses a letter of clearance from his or her orthopedic surgeon or treating physician.
<input type="checkbox"/>	<input type="checkbox"/>	Has no uncontrolled psychiatric disorders.
<input type="checkbox"/>	<input type="checkbox"/>	Has had no seizures in the last year.
<input type="checkbox"/>	<input type="checkbox"/>	Does not have poorly controlled diabetes.
<input type="checkbox"/>	<input type="checkbox"/>	If less than 18 years of age and planning to scuba dive, does not have diabetes, asthma, or seizures.
<input type="checkbox"/>	<input type="checkbox"/>	For high-adventure participants, I have reviewed with them the important supplemental risk advisory provided.

Examiner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Provider printed name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_

Office phone: \_\_\_\_\_

#### Height/Weight Restrictions

If you exceed the maximum weight for height as explained in the following chart and your planned high-adventure activity will take you more than 30 minutes away from an emergency vehicle/accessible roadway, you may not be allowed to participate.

Maximum weight for height:

Height (inches)	Max. Weight						
80	196	65	195	70	226	75	260
81	172	66	201	71	233	76	267
82	178	67	207	72	239	77	274
83	183	68	214	73	246	78	281
84	189	69	220	74	252	79 and over	295



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CARIBBEAN AMERICAN FOR COMMUNITY INVOLVEMENT In Florida, Inc.  
& THE VILLAGE OF ROYAL PALM BEACH

Present



# Cultural Diversity Day

Saturday, May 13, 2017

1:00 pm To Sundown

Veterans Park in Royal Palm Beach

(Royal Palm Beach Boulevard and Sparrow Drive)

Featuring:

Artists from Around The World

Showtime  
3:00 PM

- FOOD VENDORS
- DISPLAYS • DOMINOES
- BOUNCE HOUSE

EVERYONE  
IS INVITED  
EVENT IS  
FREE

Bring your chairs, blankets, tents  
and the entire family  
and be prepared to have a good time.

INTERNATIONAL  
ERNI GONES

For More Information, contact:

Elet Cyris 561-791-9087 - Ernie Garvey 561-676-5664

Village Of Royal Palm Beach Cultural Center at 561-790-5149

or visit [www.cafcipc.org](http://www.cafcipc.org)

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The Palm Beach Post  
REAL NEWS STARTS HERE



# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

April 10th, 2017

4/11/17- Troop Meeting  
Class A

4/18/17- Patrol Meeting- PLC and  
Committee Meeting  
Class B

4/21/17-4/23/17- Order of the Arrow  
Section Conference

4/25/17- Patrol Meeting

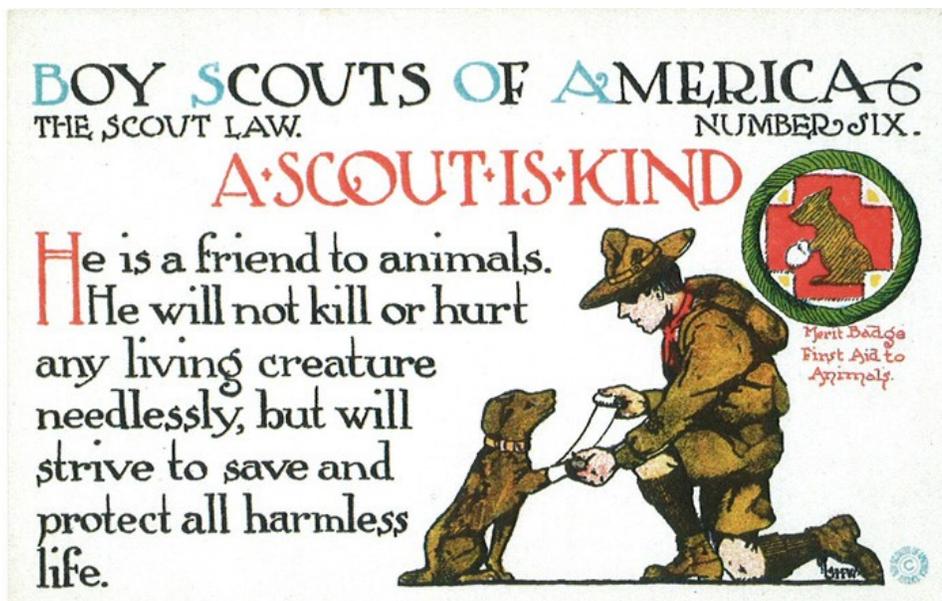
4/28/17-4/30/17- Quiet Waters Park  
Campout

5/2/17- PLC and Committee Meeting  
ClassB

5/5/17-5/7/17- OA Ordeal  
Tannah Keeta

5/9/17- Troop Meeting  
Class A

5/16/17- Troop Meeting  
Class A



A Scout is **Kind**: A Scout treats others as he wants to be treated. He never harms or kills any living thing without good reason.

Riddle: What do you get when you cross a baseball player with a boy scout?

Answer: A boy who likes to pitch tents.



## In This Issue

- Away Camp: Camp Woodruff- RSVP by Tuesday!
- OA Sectionals Coming Soon
- National Jamboree- Announcement
- Scout Scholarship Fund
- Summer Camp Forms

## Away Camp This Summer– RSVP by 4/11

### Boy Scout Oath:

On my honor, I will do my best

To do my duty to God and my country and to obey the Scout Law;

To help other people at all times;

To keep myself physically strong, mentally awake and morally straight.

### Boy Scout Motto:

Be Prepared!

### Boy Scout Slogan:

Do a Good Turn Daily!

Camp Woodruff is the away camp this year. This camp is going to be full of amazing adventures. Please make sure that you sign up on Scout Pay if you plan on attending. It is important that an accurate headcount be taken. <http://www.campwoodruff.org/>



## OA Section Conference

The Order of the Arrow Section Conference is coming up on April 21st. According to the Gulfstream Council's website, the location is yet to be determined, but is on the calendar. Be sure to stay tuned to future newsletters for updates, or check for yourself at the following link:

[https://www.gulfstreamcouncil.org/OA\\_Section\\_Conf17](https://www.gulfstreamcouncil.org/OA_Section_Conf17)



# Scout Scholarship Fund

To all Troop 111 friends, family, and alumni,

As you may know our troop has always had the philosophy to allow any scout who wishes to camp to go, regardless of their ability to pay. To offset this expense we have always maintained a scholarship account, unfortunately that account has become depleted. I would like to ask for any of you who can afford it to make a small donation to our scholarship fund. Thanks to your generosity, many Scouts have attended summer camps and experienced things that they would not have been able to do without your support. Contrary to what you may have heard or been told about scholarships Tanah Keeta does not give out scholarships the only way we can subsidize our Scouts summer camp is through our Troop 111 scholarship fund. Remember that a small amount donated by many individuals can add up to a substantial amount and allow us to continue to let everyone experience the thrill of camping.

Please make checks payable to Troop111. In the memo box write -T111 Scholarship fund.

Ways to send checks:

1. Drop off at our meeting any Tuesday
2. Mail to me:  
Harold Williams  
119 Venetian Lane  
Royal Palm Beach, Fl. 33411
3. If neither of these ways work please call me 561-346-6891 and we can arrange for someone to pick up from you.

Thank you for your continued support of Troop 111– YIS- Mr. Williams

## National Jamboree– Announcement

The Gulf Stream Council is sending 2 troops and 1 Venturing crew to the 2017 National Jamboree. The trip of a lifetime for a Boy Scout! The Gulf Stream Council is doing a pre trip experience prior to arriving at the Summit. During the pre trip, the Gulf Stream Council scouts will be going on a white water adventure as well as a spelunking trip. And then onto 10 days at the summit. The days will be filled with zip lining, shooting ranges, water activities, STEM, BMX, skateboarding, patch trading, amazing shows, and so much more.

Two of the scouts attending are from T111. Those scouts are **Blake Fearon** and **Carlos Chirino**. On Sunday at the Jambo Troop D4312 meeting, both Blake and Carlos were voted into leadership positions by their peers. Carlos will be 1 of 4 patrol leaders, and Blake will be the SPL. If anyone is still interested in attending Jambo 2017, you can contact the council office for more information. We look forward to hearing amazing stories about Jambo 2017 when Carlos & Blake return to South Florida.



# Tanah Keeta Summer Camp

It's that time of year again.

Time to sign up for  
Tannah Keeta Summer Camp  
on ScoutPay.

Week1: June 19th—24th

There are 4 different optional adventures available to those old enough and willing to participate.

If you have questions about whether you should be on a merit badge path or an advancement path this summer, talk with Mr. Williams or another ASM.

They will be happy to go over your options with you so that you have the best summer camp you can.

Notify Mr. Williams by 4/11/17 if you intend on attending!



**WHAT DO WE OFFER?**

- Phenomenal Staff
- Excellent Customer Service
- A True Scout-like Atmosphere
- Air Conditioned Dining Hall with First Class Food
- Every Campsite has Electricity, Latrines, Pavilions, and Plenty of Sand!
- Activities Tailored to YOUR Units Needs
- Over 75 Merit Badges Taught Weekly
- Top-notch First Year Camper Program
- GaGa Ball, Basketball, Volleyball and Soccer
- Evening Activity Themes
- Spacious Air Conditioned and Wifi Connected Leader's Lounge
- Nationally Accredited
- 4 NEW Specialty Adventures



**JOIN US ON ALL OF OUR NEW ADVENTURES!!!**

-  TK Ocean Adventure
-  Loxahatchee River Adventure
-  TK Angler Adventure
-  TK SCUBA Adventure(s)

**PLUS-** don't forget our TRADITIONAL BOY SCOUT SUMMER CAMP!!!

Can't get enough Tanah Keeta Adventure? **GO PRO!!!**  
Sign up to join our Provisional unit **TODAY!!!**



## Note about Health Forms

Health forms are only good for one year. This means that sections A, B, and C have to be completed by June 1st to attend Summer Camp. You will need duplicates if attending Camp Woodruff.

The following pages contain those forms. Here is the link if you would prefer to download them:

Summer Camp: [http://www.scouting.org/filestore/HealthSafety/pdf/680-001\\_ABC.pdf](http://www.scouting.org/filestore/HealthSafety/pdf/680-001_ABC.pdf)

If you are participating in other activities, such as SCUBA, please see the following link for additional heal forms:

<http://www.scouting.org/scoutsource/HealthandSafety/ahmr.aspx>

In addition, if doing COPE and Climbing, SCUBA, Snorkeling, etc, there are additional permission forms found on this page:

<https://www.gulfstreamcouncil.org/summer-camp>

## Part A: Informed Consent, Release Agreement, and Authorization

Full name: \_\_\_\_\_

DOB: \_\_\_\_\_

High-adventure base participants:

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

### 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: \_\_\_\_\_

Telephone: \_\_\_\_\_

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

#### Adults NOT Authorized to Take Youth To and From Events:

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_



## Part B: General Information/Health History

Full name: \_\_\_\_\_

**High-adventure base participants:**

Expedition/crew No.: \_\_\_\_\_  
or staff position: \_\_\_\_\_

DOB: \_\_\_\_\_

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.**



**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 (anginal)/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"/>	Meadles/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: \_\_\_\_\_



## Part C: Pre-Participation Physical

This part must be completed by certified and licensed physicians (MD, DO), nurse practitioners, or physician assistants.

Full name: \_\_\_\_\_

DOB: \_\_\_\_\_

### High-adventure base participants:

Expedition/crew No.: \_\_\_\_\_

or staff position: \_\_\_\_\_

**!** You are being asked to certify that this individual has no contraindication for participation inside a Scouting experience. For individuals who will be attending a high-adventure program, including one of the national high-adventure bases, please refer to the supplemental information on the following pages or the form provided by your patient. **!**

Examiner: Please fill in the following information:

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

Height (inches): \_\_\_\_\_ Weight (lbs.): \_\_\_\_\_ BMI: \_\_\_\_\_ Blood Pressure: \_\_\_\_\_ / \_\_\_\_\_ Pulse: \_\_\_\_\_

	Normal	Abnormal	Explain Abnormalities
Eyes	<input type="checkbox"/>	<input type="checkbox"/>	
Ears/nose/throat	<input type="checkbox"/>	<input type="checkbox"/>	
Lungs	<input type="checkbox"/>	<input type="checkbox"/>	
Heart	<input type="checkbox"/>	<input type="checkbox"/>	
Abdomen	<input type="checkbox"/>	<input type="checkbox"/>	
Genitalia/hernia	<input type="checkbox"/>	<input type="checkbox"/>	
Musculoskeletal	<input type="checkbox"/>	<input type="checkbox"/>	
Neurological	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	

### Examiner's Certification

I certify that I have reviewed the health history and examined this person and find no contraindications for participation in a Scouting experience. This participant (with noted restrictions):

True	False	Explain
<input type="checkbox"/>	<input type="checkbox"/>	Meets height/weight requirements.
<input type="checkbox"/>	<input type="checkbox"/>	Does not have uncontrolled heart disease, asthma, or hypertension.
<input type="checkbox"/>	<input type="checkbox"/>	Has not had an orthopedic injury, musculoskeletal problems, or orthopedic surgery in the last six months or possesses a letter of clearance from his or her orthopedic surgeon or treating physician.
<input type="checkbox"/>	<input type="checkbox"/>	Has no uncontrolled psychiatric disorders.
<input type="checkbox"/>	<input type="checkbox"/>	Has had no seizures in the last year.
<input type="checkbox"/>	<input type="checkbox"/>	Does not have poorly controlled diabetes.
<input type="checkbox"/>	<input type="checkbox"/>	If less than 18 years of age and planning to scuba dive, does not have diabetes, asthma, or seizures.
<input type="checkbox"/>	<input type="checkbox"/>	For high-adventure participants, I have reviewed with them the important supplemental risk advisory provided.

Examiner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Provider printed name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_

Office phone: \_\_\_\_\_

#### Height/Weight Restrictions

If you exceed the maximum weight for height as explained in the following chart and your planned high-adventure activity will take you more than 30 minutes away from an emergency vehicle/accessible roadway, you may not be allowed to participate.

Maximum weight for height:

Height (inches)	Max. Weight						
80	196	65	195	70	226	75	260
81	172	66	201	71	233	76	267
82	178	67	207	72	239	77	274
83	183	68	214	73	246	78	281
84	189	69	220	74	252	79 and over	295

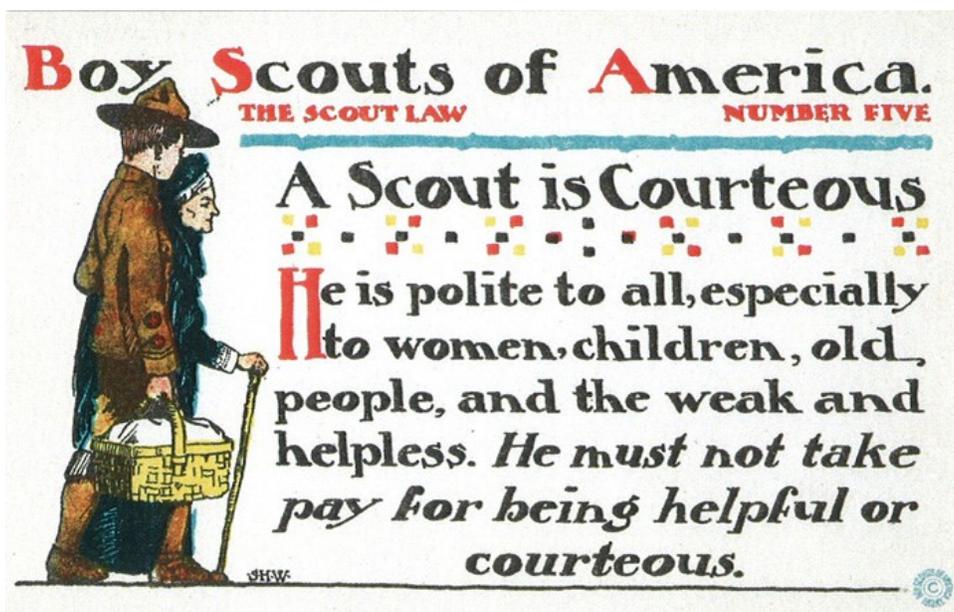




# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

March 27th, 2016



3/27/17– OA Monthly Meeting  
Living Lord Lutheran Church 7pm

3/28/17– Troop Meeting  
Class A—Elections

3/31/17-4/2/17– Fisheating Creek  
Campout

4/4/17– Court of Honor

4/11/17– Troop Meeting  
Class A

4/18/17– Patrol Meeting– PLC and  
Committee Meeting  
Class B

4/21/17-4/23/17– Order of the Arrow  
Section Conference

4/25/17– Patrol Meeting

4/28/17-4/30/17– Quiet Waters Park  
Campout

A Scout is Courteous: A Scout is polite to everyone and always uses good manners.

Riddle: What does it mean when the barometer is falling?

Answer: The scout that nailed it up didn't do a good job.



## In This Issue

- Camp Cards are IN! Let's get them sold!
- Fisheating Creek Campout– RSVP by Tuesday 3/28
- Away Camp: Camp Woodruff– RSVP ASAP!
- OA Sectionals Coming Soon

## Away Camp This Summer

### Boy Scout Oath:

On my honor, I will do my best

To do my duty to God and my country and to obey the Scout Law;

To help other people at all times;

To keep myself physically strong, mentally awake and morally straight.

### Boy Scout Motto:

Be Prepared!

### Boy Scout Slogan:

Do a Good Turn Daily!

Camp Woodruff is the away camp this year. This camp is going to be full of amazing adventures. Please make sure that you sign up on Scout Pay if you plan on attending. It is important that an accurate headcount be taken. <http://www.campwoodruff.org/>



## Fisheating Creek Campout– coming really, really soon!

Fisheating Creek is arguably one of the best campgrounds within two hours of home. With wild turkey, boar, deer, turtles, alligators, raptors, and the occasional black bear, your Fisheating Creek adventure is bound to be exciting! Don't miss this trip. It is up on ScoutPay for \$55 and is March 31st-April 2nd. The weather should be perfect, and the company couldn't be better.

- Please reach out to Mr. Lange or Mr. Williams if you are having difficulty getting funds posted to your ScoutPay account and intend on attending.



# Camp Cards

Hi everyone, don't forget, we still have lots of Camp cards that need to be sold. They are \$5 each and \$2.50 will go into your Scout account once cards are sold. Please see me at the beginning of the troop meetings if you would like to buy more cards. Or text or call me 561-791-2657. I can meet most evenings after 6.15 p.m.

Cards can be sold anytime at the Walgreens at The Crossroads Plaza Royal Palm Beach and at Red Barn in Loxahatchee. And of course to any of your neighbors, friends and family.

Thank you,

Barbara Palmowski

## CAMP CARD INCENTIVES

You earn \$2.50 on every camp card sold.

Every Scout that sells over 100 cards will receive a

**\$20 Scout Shop Gift Card**

TOP DISTRICT SELLER— \$50 Bass Pro Gift Card (Must sell 150 minimum)

TOP COUNCIL SELLER—\$250 Bass Pro Gift card (must sell 250 minimum)

⇒ GIFT CARDS WILL BE PRESENTED TO EACH INDIVIDUAL WINNER AT A ROUNDTABLE OR UNIT MEETING BY A COUNCIL REPRESENTATIVE

⇒ TO QUALIFY FOR CAMP CARD INCENTIVES, ALL MONEY AND CARDS MUST BE TURNED IN BY APRIL 19TH, 2017

Here are some helpful tips from the GSC Camp Card GuideBook found here: <https://www.gulfstreamcouncil.org/camp-cards>

# Scout Family Opportunity

Good afternoon Troop 111 Scouts and Families,

I hope each of you has enjoyed a relaxing, fun and blessed spring break!

Our Troop 111 Scout families have been offered the opportunity to participate in this years VAFMSF High Tea on **April 9th** from 3-6pm! (See the attached invitation)

This is a lovely event that **directly** benefits our T111 Scouts each year.

The proceeds from this Tea help to fund *our Troop 111 Eagle Scout scholarships!*

Every year the VAF Scholarship Fund has a Tea Party to raise the funds needed for the Scholarships.

\*Ladies wear Hats and gloves and Men wear Hats and Bowties.

There are usually about 125 in attendance.

Our very own CAFCI charter, Mrs. Davis, has arranged this year for some of the Scout Moms, (and of course Dads if they are so inclined) to attend and see what they do and what VAFMSF is all about. Mrs. Davis has graciously arranged for **(Ten)** 1/2 price tickets at \$20 p/p.

(The regular ticket price is \$40), which she is offering to the Troop. This year's event is being held at the Madison Green Golf and Country Club's Ballroom in Royal Palm Beach on April 9th from 3-6pm.

The discount tickets are 1st come, 1st serve.

I personally look forward to attending this fun event and hope some of you will join me in representing our T111 scout family.

Please contact me via text or phone if you are interested and I will reserve your spot today!

YIS,  
Cheri Estevez  
[RN4FLA@GMAIL.COM](mailto:RN4FLA@GMAIL.COM)  
561-951-5332



# OA Section Conference

The Order of the Arrow Section Conference is coming up in April. According to the Gulfstream Council's website, the location is yet to be determined, but is on the calendar. Be sure to stay tuned to future newsletters for updates, or check for yourself at the following link:

[https://www.gulfstreamcouncil.org/OA\\_Section\\_Conf17](https://www.gulfstreamcouncil.org/OA_Section_Conf17)



## Tanah Keeta Summer Camp

It's that time of year again.

Time to sign up for  
**Tannah Keeta Summer Camp**  
on ScoutPay.

**Week1: June 19th—24th**

There are 4 different optional adventures available to those old enough and willing to participate.

If you have questions about whether you should be on a merit badge path or an advancement path this summer, talk with Mr. Williams or another ASM.

They will be happy to go over your options with you so that you have the best summer camp you can.

### WHAT DO WE OFFER?

- 🕒 Phenomenal Staff
- 🕒 Excellent Customer Service
- 🕒 A True Scout-like Atmosphere
- 🕒 Air Conditioned Dining Hall with First Class Food
- 🕒 Every Campsite has Electricity, Latrines, Pavilions, and Plenty of Sand!
- 🕒 Activities Tailored to YOUR Units Needs
- 🕒 Over **75** Merit Badges Taught Weekly
- 🕒 Top-notch First Year Camper Program
- 🕒 GaGa Ball, Basketball, Volleyball and Soccer
- 🕒 Evening Activity Themes
- 🕒 Spacious Air Conditioned and Wifi Connected Leader's Lounge
- 🕒 Nationally Accredited
- 🕒 **4 NEW** Specialty Adventures



### JOIN US ON ALL OF OUR NEW ADVENTURES!!!

-  TK Ocean Adventure
-  Loxahatchee River Adventure
-  TK Angler Adventure
-  TK SCUBA Adventure(s)
-  **PLUS-** don't forget our **TRADITIONAL BOY SCOUT SUMMER CAMP!!!**

Can't get enough Tanah Keeta Adventure? **GO PRO!!!**  
Sign up to join our Provisional unit **TODAY!!!**

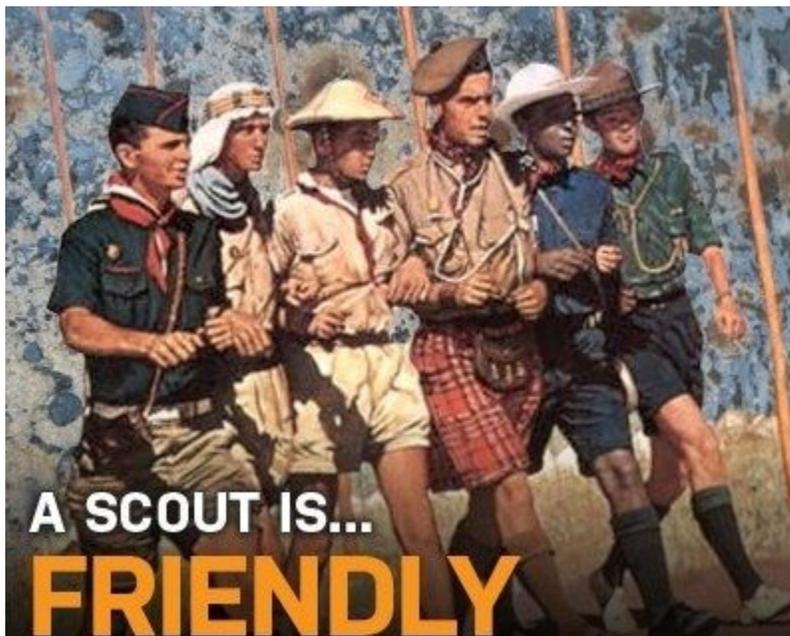




# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

March 20th, 2016



A Scout is Friendly: A Scout is a friend to everyone, even people who are very different from him.

3/21/17– Troop Meeting  
Class A

3/27/17– OA Monthly Meeting  
Living Lord Lutheran Church 7pm

3/28/17– Troop Meeting  
Class A

3/31/17-4/2/17– Fisheating Creek  
Campout

4/4/17– Court of Honor

4/11/17– Troop Meeting  
Class A

4/18/17– Patrol Meeting– PLC and  
Committee Meeting  
Class B

4/21/17-4/23/17– Order of the Arrow  
Section Conference

4/25/17– Patrol Meeting

4/28/17-4/30/17– Quiet Waters Park  
Campout

Riddle: What happened to the Scout who ironed a four leaf clover?

Answer: He really pressed his luck



## In This Issue

- Camp Cards are IN!
- Fisheating Creek Campout
- Away Camp: Camp Woodruff– RSVP ASAP!
- OA Sectionals Coming Soon

## Away Camp This Summer

### Boy Scout Oath:

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Be Prepared!

### Boy Scout Slogan:

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# Camp Cards

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Please see a committee member to purchase yours to sell.

Here are some helpful tips from the GSC Camp Card GuideBook found here: <https://www.gulfstreamcouncil.org/camp-cards>

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# Service Date Update

## Strathmore Gate Cleanup

Thank you to all who could attend this special service project for Strathmore Gate last Saturday.



# OA Section Conference

The Order of the Arrow Section Conference is coming up in April. According to the Gulfstream Council's website, the location is yet to be determined, but is on the calendar. Be sure to stay tuned to future newsletters for updates, or check for yourself at the following link:

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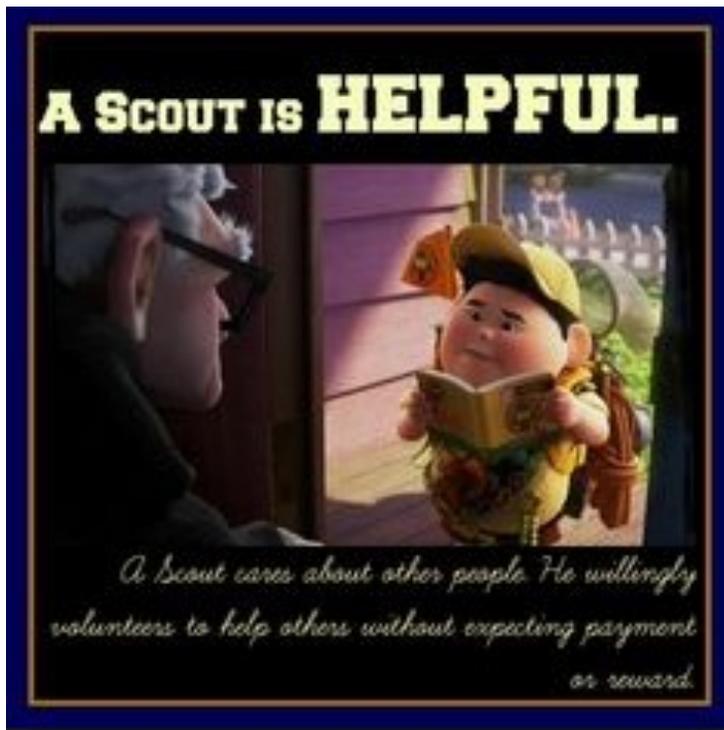




# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

March 13th, 2016



A Scout is Helpful: A Scout volunteers to help others without expecting a reward.

3/14/17– Troop Meeting  
Class A

3/18/17– Strathmore Gate Service  
Project

3/21/17– Troop Meeting  
Class A

3/28/17– Troop Meeting  
Class A

3/31/17-4/2/17– Fisheating Creek  
Campout

4/4/17– Court of Honor

4/11/17– Troop Meeting  
Class A

4/18/17– Patrol Meeting– PLC and  
Committee Meeting  
Class B

4/21/17-4/23/17– Quiet Waters Park  
Campout

4/25/17– Troop Meeting  
Class A

Riddle: Why did the insect eat on the tent flap?

Answer: It was a dining fly.



## In This Issue

- Camp Cards are IN!
- Fisheating Creek Campout
- Upcoming Service Date

## Away Camp This Summer

### Boy Scout Oath:

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## Upcoming Service Date!!!

### Strathmore Gate Cleanup

Saturday: 3/18/2017

9am-12pm (approximately)

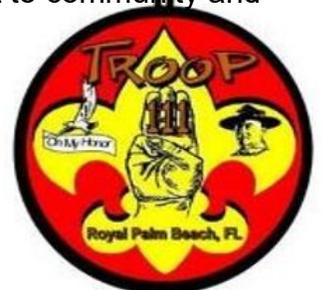
Strathmore Gate is a retirement community located at Okeechobee Blvd. and Crestwood they are a 501C3 organization so are non profit and hours spent there will also count as service hours for those in need of them for other organizations, such as the NJHS. The entrance is on the South side of Okeechobee just East of Crestwood.

They have a preserve area located on Crestwood that has a lot of trash dumped into it by passing cars. They have reached out to us to help clean it up. They are going to supply water and snacks for the boys. We will be there for 3ish hours. **Bring Gloves, a water bottle, and sunscreen.**

This will probably be an ongoing project that we can revisit every few months so the service hours will end up being pretty good for the boys.

What an honor to know that this organization recognizes the Scouts' commitment to community and service and has requested our help!

**Please RSVP on Scout Pay**





# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

March 6th, 2016

**Loy·al·ty**  
[loi-uhl-tee] *noun*  
the state or quality, or an instance  
of being **loyal**; FAITHFULNESS to  
commitments or **obligations**.

A Scout is Loyal: A Scout is true to his family, friends, Scout leaders, school, and country.

3/7/17– Patrol Meeting– PLC and  
Committee Meeting  
Class B

3/11/17– Relay For Life 11am until  
11pm at the Fairgrounds

3/14/17– Troop Meeting  
Class A

3/18/17– Strathmore Gate Service  
Project

3/21/17– Troop Meeting  
Class A

3/28/17– Troop Meeting  
Class A

3/31/17-4/2/17– Fisheating Creek  
Campout

4/4/17– Court of Honor

4/11/17– Troop Meeting  
Class A

4/18/17– Patrol Meeting– PLC and  
Committee Meeting  
Class B



## In This Issue

- Camp Cards are IN!
- Fisheating Creek Campout
- Upcoming Service Dates

## Order of the Arrow

### Boy Scout Oath:

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To do my duty to God and my country and to obey the Scout Law;

To help other people at all times;

To keep myself physically strong, mentally awake and morally straight.

### Boy Scout Motto:

Be Prepared!

### Boy Scout Slogan:

Do a Good Turn Daily!

### A Big Congratulations

This past weekend, Oliver Brown, Carlos Chirino, Jonathan Farrell, William Gulley and Jared Lange completed the OA Ordeal and became our troop's newest members of the Order of the Arrow.



## Fisheating Creek Campout– coming soon!

Fisheating Creek is arguably one of the best campgrounds within two hours of home. With wild turkey, boar, deer, turtles, alligators, raptors, and the occasional black bear, your Fisheating Creek adventure is bound to be exciting! Don't miss this trip. It is up on ScoutPay for \$55 and is March 31st-April 2nd. The weather should be perfect, and the company couldn't be better.



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Please see a committee member to purchase yours to sell.

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## CAMP CARD INCENTIVES

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## Upcoming Service Dates!!!

### Relay for Life

Saturday: 3/11/2017

Noon-11pm

Relay For Life is the signature fundraiser for the American Cancer Society. Relay is staffed and coordinated by volunteers in more than 5,200 communities and 20 countries who give of their time and effort because they believe it's time to take action against cancer. (from the ACS website)

This year they have combined RPB, Wellington and Loxahatchee into one event to be held at the South Florida Fairgrounds. It will run from 3PM to 11PM but we will get there at noon.

We generally help the ACS set up, sell and set up the luminaries, and count the laps the participants complete. We also support our sponsor organization by walking laps for them. The event is for a great cause and our boys get a ton of service hours.

**Please RSVP on Scout Pay**

### Strathmore Gate Cleanup

Saturday: 3/18/2017

9am

Strathmore Gate is a retirement community located at Okeechobee Blvd. and Crestwood they are a 501C3 organization so are non profit and hours spent there will also count as service hours for those in need of them for other organizations, such as the NJHS.

They have a preserve area located on Crestwood that has a lot of trash dumped into it by passing cars. They have reached out to us to help clean it up. They are going to supply water and snacks for the boys. We will be there for 3 or 4 hours.

This will probably be an ongoing project that we can revisit every few months so the service hours will end up being pretty good for the boys.

What an honor to know that this organization recognizes the Scouts' commitment to community and service and has requested our help!

**Please RSVP on Scout Pay**



# TROOP 111 TRIBUNE

News-worthy articles, dates, and other things

February 27th, 2016



TRUSTWORTHY

A Scout tells the truth. He keeps his promises. Honesty is part of his code of conduct. People can depend on him.

2/28/17– Troop Meeting  
Class A

3/3/17-3/5/17– OA Spring Ordeal–  
Tanah Keeta

3/4/17– Family Fun Day–  
John Prince Park

3/7/17– Patrol Meeting– PLC and  
Committee Meeting  
Class B

3/14/17– Troop Meeting  
Class A

3/21/17– Troop Meeting  
Class A

3/28/17– Troop Meeting  
Class A

3/31/17-4/2/17– Fisheating Creek  
Campout

4/4/17– Troop Meeting  
Class A

4/11/17– Troop Meeting  
Class A

Riddle: What happened to the Scout who ironed a four leaf clover?

He really pressed his luck.



## In This Issue

- Camp Cards are IN!
- Banquet Volunteering Reminder... again
- Tanah Keeta Wrap-up
- Fisheating Creek Campout

## An Evening in the Woods Banquet & Auction

### Boy Scout Oath:

On my honor, I will do my best

To do my duty to God and my country and to obey the Scout Law;

To help other people at all times;

To keep myself physically strong, mentally awake and morally straight.

### Boy Scout Motto:

Be Prepared!

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Do a Good Turn Daily!

Hi Troop!

We still have plenty of spots open for volunteers to take part in our annual fundraising banquet. Don't be shy. You can sign up for more than one category if you have the time. We need all slots to get filled to ensure our banquet goes off without a hitch. Thank you for your help!

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# Tanah Keeta Wrap-Up

Brought to you by Mr. Williams



The 2017 new scout campout was a great success. We welcomed four new scouts into our troop and have high hopes that two more will be joining soon.

All of the old scouts arrived at TK Friday evening and hiked out to Clear Lake where we set up two camps, one for the existing scouts and one for the new scouts and their mentors.

After camp set up we went over the schedule for Saturday with the Scouts and assigned a mentor for each new Scout.

Saturday was an extremely busy day. Both camps rose early all of the existing Scouts as well as Dr. Rice and Mr. Brown spent the morning working on the set up for the up coming Gator Grind, after this service project the scouts worked on skills sign offs and assisted with the new scouts.

The Shaman as well as the remaining adults hiked to the TK parking lot where we greeted the new Scouts as well as their parents.

Once at camp the adults split off and spent the day with Mr. Whalen and Mr. Farrell learning about how the troop is run as well as setting up their own campsite. The new Scouts then spent an intense day not only setting up their campsite but getting signed off on skills for their Scout rank. After dinner we had a special campfire where the arrow of light ceremony was performed for the scouts from Pack 165, followed by a crossover ceremony performed for the four Scouts joining our troop.

A semi-great cracker barrel followed the campfire with lights out at 11 PM. Sunday morning the troop rose at 6:30 cooked breakfast, broke down camp and had a roses and thorns ceremony with the scouts hiking out by 9:30. A great campout and a fantastic effort by the Shaman.

Special Note: The new Scout campout is the hardest campout we do. A lot of time and effort goes into making it a success. I want to thank Dr. Rice, Mr. Farrell, Mr. Brown and Mr. Whalen for all of their help with this campout and for all of the other things they do for our troop.—Mr Williams



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## Free Family Event Saturday, March 4th, 2017

On Saturday, March 4th, there is going to be a free family event at John Prince Park from 10am until 3pm. It looks like there will be some awesome events and instruction available. I hope to see lots of T111 family and friends there!

The poster features a green and orange color scheme. At the top, it lists 'Palm Beach County Parks and Recreation' and 'Florida Fish and Wildlife Conservation Commission'. The main title is 'OUTDOOR ADVENTURE' in large white letters on a green background, with 'FREE FAMILY EVENT!' and 'DAY' below it. A photo shows a boy in a red life vest in a canoe. Text on the left provides event details: Location: John Prince Park, Smythe Pavilion; Date: Saturday, March 4, 2017; Time: 10 a.m.-3 p.m.

**Palm Beach County Parks and Recreation and Florida Fish and Wildlife Conservation Commission**

are hosting **Outdoor Adventure Day**. This event is **FREE**. Programs include

- \* Fishing for all ages: Instruction on site and equipment available for use during event
- \* Canoeing
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- \* Exhibitors

**Location: John Prince Park: Smythe Pavilion**

**Date: Saturday, March 4, 2017**

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FOOD TRUCKS ON SITE. For more information please call [561-292-6050](tel:561-292-6050). Click [HERE](#) for flyer.



# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

February 20th, 2016



## Outdoor Ethics

### • Outdoor Code

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  - We will clean up after ourselves using pack it in, pack it out techniques. We avoid leaving graffiti, fire rings, camp gadgets, and other signs of our presence.
- Be careful with fire
  - Fire is an important tool, but one that can be devastating if it gets out of hand. We think about the need for fire, how best to use it, and how to minimize its impacts.
- Be considerate in the outdoors
  - We will think about others as well as ourselves and how our presence impacts them. We think about not just our impact on other humans, but also on wildlife and the environment.
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A rash of good luck



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I found this handy reminder on the Fisheating Creek website to Leave No Trace. It ties in perfectly with the Outdoor Ethics reminder on page 1. With all the great trips coming up, I thought it was a good idea to remind everyone of both of these practices. Happy camping!

### Leave No Trace

All scouting organizations practice Leave No Trace, a set of ideas that singularly might seem unimportant until you consider the combined effects of millions of visitors to our nation's parks and campgrounds. Some basic rules:

1. Plan Ahead and Prepare
2. Travel and Camp on Durable Surfaces
3. Dispose of Waste Properly (Pack It In, Pack It Out)
4. Leave What You Find
5. Minimize Campfire Impacts
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- Commission on a camp card is \$2.50. There are no upfront fees and you can return any unsold cards. This is the perfect fundraiser for any unit. Selling camp cards enables a unit to have the funds to deliver their Program. We are selling the "ADVENTURE OF SCOUTING" and people will buy if asked.
- People are curious by nature and want to know why Scouts are selling camp cards ... what is the reason? Why should I buy?
- Make sure Scouts and parents understand how the Camp Card sale directly benefits their unit program.
- A Scout earns their way. What better way to teach responsibility and how to be thrifty than to teach a youth how to pay for the things he desires. New backpack, sleeping bag, summer camp etc.

## WHAT SHOULD THE SCOUT SAY?

ALWAYS SMILE

Hello, my name is \_\_\_\_\_ (First Name only)

I am working hard to EARN \_\_\_\_\_

We have this amazing Camp Card. You can purchase it for \$5.00 and it will really help me to \_\_\_\_\_

Explain the card and what is on it. Explain the value

Ask How many would you like to purchase

Thank the Customer for supporting you and the Scouting Program And Investing in the future of a youth.

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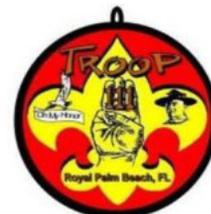
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Palm Beach County  
Parks and Recreation

Florida Fish and Wildlife  
Conservation Commission

# OUTDOOR ADVENTURE

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### DAY

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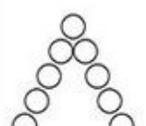
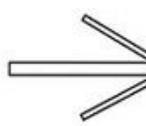
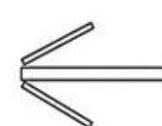
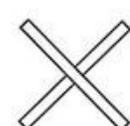
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**TRAIL SIGNS** 

fivellittlechefs.com I have gone home

 Straight Ahead	 Turn Right	 Turn Left	 Don't go this way
 Straight Ahead	 Turn Right	 Turn Left	 Don't go this way
 Straight Ahead	 Turn Right	 Turn Left	 Don't go this way

Riddle: Why did Joe Scout cook beef in his tent?

He wanted to have beef steaks.



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I imagine that the first week in February was filled with anticipation and excitement for a few T111 members. Josh Caudill, Blake Fearon, David King, and Larry and Carl Mohr were inducted into the Order of the Arrow Brotherhood.

The OA is essentially the National Honor Society of the BSA. It is an incredible honor to have the opportunity to be a part of a group which reinforces the Scout Oath and Scout Law and exemplifies the ideals of Scouting.

I'm sure that these young men will represent glowing examples of what it means to be in the Order.

"The Order of the Arrow is a 'thing of the spirit' rather than of mechanics. Organization, operational procedure, and paraphernalia are necessary in any large and growing movement, but they are not what count in the end. The things of the spirit count: Brotherhood, in a day when there is too much hatred at home and abroad; Cheerfulness, in a day when the pessimists have the floor; Service, in a day when millions are interested only in getting or grasping rather than giving."

E. Urner Goodman, founder



# Andrew Lange's Eagle Scout Project Installation Courtesy of Dr. Rice



The young scouts looked on in awe...



## Andrew Lange Eagle Project

### Mounts Botanical Garden

This past Sunday (February 12) saw the completion of yet another Troop 111 Eagle project, specifically Andrew Lange's construction project at the Mounts Botanical Garden. This garden is a Palm Beach County facility, and is a beautiful place to explore at a relaxing place. But there was nothing relaxing about Sunday, since 3 construction events occurred at the same time, including a curved wooden bridge in the Butterfly Garden, a much-improved flat bridge with railings in the Rainforest Garden, and the installation of a new trellis system for large rose bushes to climb through. Under Andrew's leadership, much of the heavy-duty lumber cutting and measuring occurred the week before at his house, and we thank the scouts and ASMs who showed up to help. Sunday involved roughly 30 scouts and ASMs, including 3 Eagle Scouts (Ross Thrash, Carl Mohr, Chris Rice) who understand the value of helping out on these projects since scouts helped them be successful with their own Eagle projects. Andrew delegated responsibilities and split the group into 3 teams, and after that there was lots of lumber drilling, hole digging, sand/mulch wheelbarrowing, and engineering decision making, but by 2:00 pm, the entire project was completed and looked absolutely fantastic. On Monday, the Mounts horticulture staff toured the 3 projects and they are very happy with the results, they indicate that these are significant improvements that they could not have done on their own, and they expressed surprise that the project was already finished. Basically Mounts is now a big fan of Troop 111, and they want to thank Andrew for his leadership in making Mounts a more aesthetically pleasing botanical garden for their visitors. As for Andrew? We are happy to say that "this Eagle has landed" !

# American Legion Cracker Trail at Tanah Keeta

Find your American Legion host and man your wagons! It's time to crack the whip and have a roarin' good time!

This is up on ScoutPay for \$35. Don't miss it! February 24th, 2017



## Useful Stuff from Council

If you are not already signed up, the Gulf Stream Council has a great and informative newsletter that you can subscribe to if you would like to be notified of cool stuff happening around the district. While I dare say that it will not be quite as amazing as this one (kidding because it's awesome), there are always fun notifications and campouts available. This for example:

Palm Beach County  
Parks and Recreation

Florida Fish and Wildlife  
Conservation Commission

## OUTDOOR ADVENTURE

### FREE FAMILY EVENT!

**Location:** John Prince Park  
Smythe Pavilion

**Date:** Saturday, March 4, 2017

**Time:** 10 a.m.-3 p.m.

Palm Beach County Parks and Recreation and Florida Fish and Wildlife Conservation Commission

are hosting **Outdoor Adventure Day**. This event is **FREE**. Programs include

- \* Fishing for all ages: Instruction on site and equipment available for use during event
- \* Canoeing      \* Archery
- \* Daisy Inflatable BB Shooting Sport Safety Range
- \* Vendors      \* Exhibitors

**Location:** John Prince Park: Smythe Pavilion

**Date:** Saturday, March 4, 2017

**Time:** 10 a.m.-3 p.m.

FOOD TRUCKS ON SITE. For more information please call [561-292-6050](tel:561-292-6050). Click [HERE](#) for flyer.



# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

January 23rd, 2016



1/24/17– Troop Meeting  
Class A

1/31/17– NO MEETING

2/7/17– Patrol Meeting– PLC and  
Committee Meeting  
Class B

2/10-2/12- Skills Campout

2/14/17– Troop Meeting  
Class A

2/21/17– Troop Meeting  
Class A

2/24/17-2/26/17– TK Camping Trip–  
American Legion Cracker Trail

2/28/17– Troop Meeting  
Class A

3/7/17– Patrol Meeting– PLC and  
Committee Meeting  
Class B

Riddle: What is the best way to carve wood?



## In This Issue

- Upcoming TK Campout
- Banquet Volunteering Reminder
- Word Jumble (no answer key available... good luck)

## An Evening in the Woods Banquet & Auction

### Boy Scout Oath:

On my honor, I will do my best

To do my duty to God and my country and to obey the Scout Law;

To help other people at all times;

To keep myself physically strong, mentally awake and morally straight.

### Boy Scout Motto:

Be Prepared!

### Boy Scout Slogan:

Do a Good Turn Daily!

Hi Troop!

The new year is here and we are in full swing planning, preparing & seeking assistance for the Troops Annual fundraiser "An Evening In The Woods" If you have not already taken the time to look at our event needs, please do so TODAY! This event is large and requires the Hands, Minds and Willingness of all the Troop Families to make it successful. We have a few changes and fun surprises planned for this year so please watch for our emails, Troop Newsletters and start sharing with your contacts & friends. We are accepting Donations NOW!

Cheri Estevez, R.N.

Troop 111 Fundraising Chair

<http://www.signupgenius.com/go/409054AA5AA23A6F94-anevening>

  
**ScoutParents**<sup>TM</sup>  
*Scouting makes great parents, too!*

V O L N T E E R

all that's missing is **U**!





# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

January 16th, 2016

## A SCOUT IS

TRUSTWORTHY  
LOYAL  
HELPFUL  
FRIENDLY  
COURTEOUS  
KIND  
OBEDIENT  
CHEERFUL  
THRIFTY  
BRAVE  
CLEAN  
REVERENT

1/17/17– Troop Meeting  
Class A

1/24/17– Troop Meeting  
Class A

1/31/17– NO MEETING

2/7/17– Patrol Meeting– PLC and  
Committee Meeting  
Class B

2/10-2/12- Skills Campout

2/14/17– Troop Meeting  
Class A

2/21/17– Troop Meeting  
Class A

2/24/17-2/26/17– TK Camping Trip–  
American Legion Cracker Trail

2/28/17– Troop Meeting  
Class A

Riddle: What member of the troop is responsible for keeping track of 25 cent pieces?



### In This Issue

- Dark Hammock Wrap-Up
- Upcoming TK Campout
- ScoutPay Reminder

## Boy Scout Oath:

On my honor, I will do my best

To do my duty to God and my country and to obey the Scout Law;

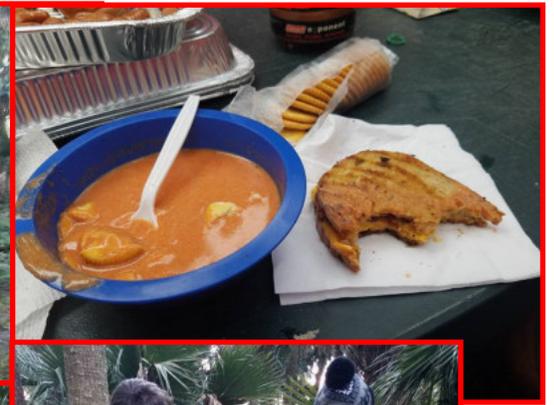
To help other people at all times;

To keep myself physically strong, mentally awake and morally straight.

## Boy Scout Motto:

Be Prepared!

## Boy Scout Slogan:



## Dark Hammock Wrap-up

### Wrap-up: brought to you by Mr. Schuemacher

They did camping and scouting things. Many camping and scouting things.

P.S. If more specifics are available for this campout, please let Mr. Schuemacher know at [sam.schuemacher@gmail.com](mailto:sam.schuemacher@gmail.com) for next week's newsletter.

# American Legion Cracker Trail at Tanah Keeta

Find your American Legion host and man your wagons! It's time to crack the whip and have a roarin' good time!

This is up on ScoutPay for \$35. Don't miss it!



## Scout Pay and other Boring Things Reminder

### 1. Camping Money Bags:

Scout's are responsible to do the patrol shopping. The money is given out to the designated Scout in a money bag. We had several go missing, bought some more and now there are some missing again. I recently go one back from an April Campout. Part of the problem is You are not bringing the receipts and bags back the very next meeting. This is an easy fix....

-Make sure the money bags are brought back the very next meeting with change and receipts. It part of being responsible to your Troop and Patrol.

Otherwise, the purchase price and change will be deducted from your accounts. Accurate idea of campout expenses helps us keep the costs down.

### 2. Scoutpay:

A. For some reason -- Lately -- the program will enter deposits twice. Not exactly at the same moment. May be minutes or hours before it pops up. I try and take care of these as soon as I notice. Feel free t let me know if you see it. Please not Freak if your account amounts drops, I am not taking money that was yours just manually fixing a double entry.

B. With that being said, I may make a mistake. Just call me, text or email me with any issues. No I Do Not check my personal email everyday.

C. A great way is to make sure you are getting receipts when giving cash to ANYONE. You may have noticed I try and enter any deposits into the accounts at the Meeting.

**D. SCOUTS should be managing these accounts, including Dues.**

### 3. Stripe Online:

Starting January 1st, a minimum \$5 fee will be deducted from the purchased amount up to \$200, then 5%. We will be reviewing some new software for purchasing and tracking in the upcoming new year.

If anyone has any questions, please send me a personal message and I will reach out to you.

Thank you,

Mr. Lange



# TROOP 111 TRIBUNE

Newsworthy articles, dates, and other things

January 9th, 2016



1/10/17-Patrol Meeting  
Class B

1/13-1/15- Dark Hammock Campout

1/17/17- Troop Meeting  
Class A

1/24/17- Troop Meeting  
Class A

1/31/17- No Meeting

2/7/17- Patrol Meeting- PLC and  
Committee Meeting  
Class B

2/10-2/12- Skills Campout

2/14/17- Troop Meeting  
Class A

2/21/17- Troop Meeting  
Class A

What does “On my honor” mean to you? By definition, it means promising to be guided by the ideals of the Scout Oath. But it also means living up to your word and keeping your promises.

Remember that kept promises and met obligations will garner respect from others in your relationships both inside of the scouting organization, and out.

Not keeping your promises will do the opposite. Make sure the promises you make are ones you intend on keeping. They matter.

Riddle me this: What is brown and furry and bothers Scouts about earning more awards?

The team with the first right answer will get bragging rights, and maybe a prize.



## In This Issue

- Dark Hammock Preview
- Wreaths Across America Recap

## Boy Scout Oath:

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## Boy Scout Motto:

Be Prepared!

## Boy Scout Slogan:

Do a Good Turn Daily!



## Wreaths Across America Wrap-up

Thank you to all who attended

Thank you to everyone who was able to attend the Wreaths Across America event last year. It was remarkable to stand in the audience and watch the procession of scouts along with the color guard and various service members, both past and present. The Wreaths Across America event is held nationwide. While you were marching up the drive here in Florida, there were undoubtedly scouts all across the country doing the exact same thing at other National Cemeteries across the country. It's sometimes easy to lose sight of the bigger picture.

In 1992, the movement began when a man whose childhood had been touched by a trip he won to our nation's capital, owned a wreath store and had some extras near the end of the season. He remembered his trip to Arlington National Cemetery when he was 12 and decided to make some calls. He quickly got plans started to get his excess wreaths transported to Virginia and laid on some graves in the older, less popular, part of the cemetery. As word spread, more organizations and individuals got involved. For several years, the tribute took place quietly. Until a photo made its way around the internet of the gravestones all adorned with green wreaths in white snow.

The annual tribute grew. What was once the Worcester family's simple gesture had grown into a national event. And, in 2014, more than 700,000 wreaths were laid across more than 1,000 locations in the world. More than 2,000 fundraising groups are involved every year to spread wreaths not only across all of the headstones in all of the National Cemeteries, but also the sites of the September 11 tragedies, Valley Forge, and Pearl Harbor. Your involvement may have seemed small, but it truly was part of a great and beautiful tribute to our fallen soldiers.

Thank you.



## Dark Hammock

The Dark Hammock campout is happening this weekend! There will be survival stuff happening, so you will certainly want to be there. Yesterday was technically the deadline for signing up, but if there are Scout Pay issues preventing you from submitting your RSVP, please email Mr. Whalen at [swhalen819@gmail.com](mailto:swhalen819@gmail.com) to let him know so that he can plan accordingly. This campout is only an hour and a half away, so you will have more time for camping and merit badge advancement things on this trip. Don't miss it!

