





BOY SCOUTS OF AMERICA®



Greetings from Bear Creek!

The great Bear Creek summer staff looks forward to joining you and your Webelos at camp this summer. We are preparing an exciting four days and three nights of activities that will make your camping experience fun and enjoyable.

Please carefully review all of the material in this booklet! It contains helpful information that will make your camping adventure easier for you and your Webelos. Do not overlook the health and insurance sections. It is essential that the proper medical forms be present when you check in to camp.

Adult leader and parent orientation will be held on two dates: May 6, 2023 from 1:30-2:30pm, and again on May 23, 2023 from 7-8pm at the Scout Service Center on 2226 NW Military Highway. The purpose of this orientation is to review the camp program, to discuss health, safety, and youth protection concerns and to assist leaders in any last-minute problems or questions.

Bear Creek is a rustic but fun place for camp. You can get in on all of the action with the scouts. Don't hold back. Have fun! Enjoy yourself If you have any questions before camp, please contact me at BearCreek@AlamoAreaBSA.org or 210-740-9370.

Yours in Scouting,

LÍNDA DÍEGUEZ Linda Dieguez Camp Director



BearCreek@AlamoAreaBSA.org
Website - www.AlamoAreaBSA.org

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WELCOME TO AKELA

Akela Adventure Camps is a unique camp experience designed just for WEBELOS and Scouts working toward Arrow of Light. The 3-day camp is planned by BSA Certified Program Directors who know Scouting well and understand how to prepare a program that meets your Scout's needs. Every staff member at Bear Creek are active in Scouts BSA and have been selected because of their knowledge and skills.



General Information

VEHICLES IN CAMP

Vehicles are only allowed in the camping area to deliver equipment upon arrival to camp. All vehicles must be moved to the parking lot immediately after unloading so that others arriving have the same convenience. Do not wait to move your vehicle - campsites should be set up only *after* vehicles have been moved to the parking area. See Page 15 for details.

FOOD ALLERGIES / DIETARY NEEDS

Email BearCreek@AlamoAreaBSA.org with any special dietary needs. See page 21.

SUPPLIES

Additional items such as trash bags, toilet paper, twine, brooms, water hoses and fire buckets may be checked out by contacting the Quartermasters.

LOST AND FOUND

All lost and found items will be kept at Camp Headquarters until the end of camp. Afterwards, items will be taken back to the Scout Service Center in San Antonio. Two weeks after camp, all items will be donated to a local charity.

Contact Information

EMERGENCY NUMBERS

Camp phones are for emergency and camp business only.

Camp HQ: (830) 238-4560 (messages only) Health Lodge: (830) 238-5093

LEAVING CAMP:

There should be no reason to leave camp, but if it should become necessary, those individuals are required to log out of the camp upon leaving and log in upon return at the Camp Headquarters.

SCOUT MAIL:

Letters are always well received by Scouts while at camp, but since camp is only four days long, in most cases, mail will not reach your Scout before they return home. Mail is best taken up with an adult leader to give out at camp.



GENERAL CAMP FACILITIES ALSO INCLUDE:

Health Lodge
Shower & Bathroom Facilities
Environmental Center
Gaga Ball Pit
Volleyball Court
OA Ceremonial Amphitheater
Astronomy Lab
Forge for Branding
Numerous Learning Centers
Quartermasters Storage Facility
Basketball Court
Climbing Wall
Fishing & Fly Fishing Areas

Trails

Kayaking Canoeing

Log Rolling

Paddle Boarding 3-Story Waterslide

Camp Amenities

CAMPSITES

All 19 campsites have a fire ring, complete with platform tenting and pavilions, close to a central Dining Hall.

CAMP TRADING POSTS

Open throughout the day, the Trading Post offers a variety of Scout items such as socks, hats, shirts, merit badge books, handicraft provisions, toothpaste, candy, juices, ice cream and a wide assortment of souvenirs. Cash and credit cards accepted.

COMMISSIONER'S AREA

Adult leaders are invited here to take a break during the program day.

DINING HALL

All meals are provided by professional cooks and served (cafeteria style) by our youth staff. Well-planned meals provide a balanced diet and seconds are usually available.

RANGES

BB Gun and Archery facilities have been designed and certified by BSA standards. Recurve bows are used on the Archery range.

SCOUTMASTER LOUNGE

Adult Leaders can enjoy our Scoutmaster Lounge which offers air-conditioning, WIFI (for adults only). This is a great place to relax or get caught up on any work you may need to take care of.

SWIMMING AREAS (In-ground Pool & Waterfront)

Swimming is restricted to prescribed areas along the waterfront and in the Swimming Pool during posted hours of operation. "Free swim" is available to everyone during scheduled hours when lifeguards are provided. A three-story twin water slide, kayaks, canoes, and paddle boards are available for use during these times.





NATIONAL CAMP STANDARDS

Bear Creek Scout Ranch is inspected annually by a team that represents the Boy Scouts of America. The Camp meets or exceeds all standards and regulations. We are also inspected regularly by the Texas Health Department. We feature a Health Lodge staffed by a qualified professional provider for routine health checks and problems. Strict health and safety standards are maintained at all times.





LOCATION

Bear Creek Scout Camp is located outside the town of Hunt, Texas. Surrounded by nature at its finest, BCSC provides a quiet, restful setting for a good night's sleep.

GETTING THERE

Make sure to give yourself plenty of time to get to Bear Creek Scout Camp. Do not caravan. This is a dangerous practice and can cause chain reaction accidents. Make sure each driver understands the route, and then let them set their own pace.

TRANSPORTATION

Each pack is responsible for its own transportation. No riders are allowed in the backs of pickups or trucks. All riders must have a seat belt. If possible, consolidate bulky items into one vehicle to help in transporting them to campsites.

QUESTIONS

A roundtable for all leaders will be held during the first day of camp. Special announcements and instructions about camp life will be included in this session. Any questions that you may have will be answered at that time. Update announcements will be made at flag ceremonies, so you'll always be in the know!



First Time Adult at Camp?

YOUTH PROTECTION:

The Youth Protection Policies of the Boy Scouts of America are practiced at Bear Creek. To insure that all Scouts have their privacy respected, National Camp Standards require that adults and youth shower and sleep separately. More detailed information about Youth Protection will be covered at the camp orientation in May.

SAFE SWIM

Bear Creek Scout Camp complies with Safe Swim Defense. All campers will be given a swimming ability test on the first day of camp if they did not complete it prior to camp. Any person, adult or youth, who wants to participate in water activities must have a swim test. We recommend taking swim tests at McGimsey Scout Park pool whenever able prior to Camp Akela (see pages 19-20).

SECURITY AT CAMP

Be certain to secure all valuables. Keeping spending money in a safe place and work with the Scouts to provide only the amount of money that they need each day. Please report all suspicious activities to camp staff. This is for the safety of all campers.

DISCIPLINE

The conduct and discipline of the people in your unit are your responsibility. We ask for your cooperation. Camp Staff will not discipline Scouts unless serious bodily injury or property damage my result. Your campsite is your home. Entering another campsite or loitering there can cause problems. Taps is at 10 pm. Campers not in their areas after 10 pm will be escorted to their campsite by camp staff.

Refund Policy

Campsite deposits are non-refundable. To ensure the Alamo Area Council can provide the best service to the Scouts and to make better investments into the lives of our youth has adopted the following refund policy:

- Paid registration fees are refundable up to eight (8) days prior to the start of an event, less a 10% supply fee, upon written request with a copy of the receipt of payment.
- From the seventh (7) day up to 24 hours prior to the start of an event fees are 50% refundable, upon written request with a copy of receipt of payment.
- From 24 hours prior to the start of an event and up to seven days after the event, refunds will only be issued in the event of a valid medical emergency, summer school or military assignment and proper documentation is provided.
- Scouts are allowed to coordinate with other Scouts to fill the position being vacated. Please notify Council of the change and we will update the roster, as required. (With the exception of events with Wait Lists).
- Transfers to another session within the same event and same year (ex. Bear Creek Session 1 to BC Session 4) are allowed but funds cannot be transferred to another event or another year.

Refund requests must be in writing to refunds@AlamoAreaBSA.org. include the Scout's name, and the reason for requesting a refund. Calling or e-mailing a change in your Troop's planned attendance numbers is not a refund request.

Adult Stuff

On the following pages, you will see the details of what we will be accomplishing with your Scouts at camp. These are the activity badge requirements and sports activities that make up the program. You, the Webelos Den Leader, are responsible for the advancement of the Scouts in your den. We will demonstrate the skills and ask them to show us what they know, but you will actually sign your webelos off on their knowledge and skill capability.

We organize the packs into camp dens to help us keep track of everyone and to make scheduling of the activities a little easier for everyone. In the next pages you will find the do's and don'ts for AAC. These have been developed over the years to provide a safe and sane camping program for each Webelos. Your cooperation is appreciated.

You will have fun this summer! Bear Creek is a great place to learn about the outdoors, the food is great and fellowship terrific. Your attitude about the experience will travel down to the Scouts. If you are up and enjoying yourself, they will too. If you are down or having problems, the Scouts see it and react to it. Please get in touch with your Camp Commissioner, the Program Director, or the Camp Director if any problems or issues come up that are not handled to your satisfaction. We can take care of the matter for you and return you to the "having fun" mode quickly.

Keep reading and see all that can be accomplished this year. We have included a sample schedule so that you can share it. Pump them up, it's going to be a great experience for all of us!

Packs are encouraged to register as unit so that the unit can track the leadership requirements and ensure proper supervision is provided, but individual registration is allowed. We will group all

participants together by unit no matter how the registration is completed. Registration links can be found here -->



LEADERSHIP REQUIREMENTS

Parents/legal guardians are not 'Adult Leaders' as defined by the BSA, but are allowed to attend Akela Adventure Camp with proper documentation (see below).

Each unit must have a minimum of two **BSA registered Adult Leaders** 21 years of age or over to meet the requirements of 2-deep leadership per Youth Protection Training guidelines. One additional Adult Leader is required or every 3 youth. There must be a registered female adult leader present in any unit serving females.

If you are not able to arrange for a second adult, send an email to BearCreek@AlamoAreaBSA.org and we will make sure you're camped with other packs to accommodate the 2-deep leadership requirement.

All adults attending camp and staying overnight with a unit must present with:

Complete Youth Protection Training (YPT) training and bring a copy of the card.

Complete Health Form- Part A, B only (Page 16-18)



Arrival Check-in

Check in instructions will and campsite assignments will be emailed May 18, 2023.

EACH PARTICIPANT MUST BRING THEIR PROPERLY COMPLETED MEDICAL FORMS. PARTS A & B ARE REQUIRED. NO PERSON, YOUTH OR ADULT, WILL BE ALLOWED TO STAY AT CAMP WITHOUT THE PROPER MEDICAL FORM

CHECK-IN REQUIREMENTS

- ☐ All units must provide adequate leadership. See page 13 for details.
- ☐ Four (4) copies of your unit's official BSA Roster, including adults
 Must be the current recharter year with all participants, highlighted showing BSA Registration
- ☐ Current BSA Health Form Part A & B, required for youth and adults (See page 16-18 for forms)
- ☐ A printed copy of each adult's Youth Protection Certificate
- Out of council troops will need proof of insurance and a copy of your claim form (see 'Insurance' on policies pages 13-15)

Check-Out

Each Camper is expected to return all camp provided items to the Quartermaster. These items include tools, flags, water jugs, etc, that are used during the week in your campsite or for service projects. Any items missing will be accounted for before a Camper is allowed to check out.

A campsite inspection will be made to insure no waste articles are left for the next occupants to clean up.

Campers will be charged for each rip that occurs on camp tents. If any tents that are deemed unrepairable by the Camp Director, the Camper will be charged for replacement.





Camp Director's Tips

- Make sure parents have signed the medical forms and accompanying notes before you get to camp
- Photocopy forms and keep the originals in a safe space at home
- Encourage Scouts to complete swim check's prior to camp, and bring form signed by individual administering test with copy of certification (see page 19-20 for forms)
- Keep an extra copy of special dietary & medical needs roster (page 21) with a unit leader for quick reference while at camp

CAMP ADVENTURE PROGRAMS







EVENING PROGRAMS

All Program areas will be open in the evenings and the afternoons of Day 3 of Camp. You can choose from Climbing, Canoeing, the 3-Story Waterslide, Swimming, Archery, BB Guns, Branding, Gaga Ball, or Basketball. There is also a Star-Party the second night of camp where staff will have telescopes set up in the valley to teach Scouts some basic constellations and stars



First Year WEBELOS Program















Fire Building

Walkabout

First Responder

Into the Woods

Earth Rocks

Aquanaut

Second Year WEBELOS Program



Building a Better World



Camper



Scouting Adventure



Castaway



Aquanaut



Fires & Safety

ADVANCEMENT

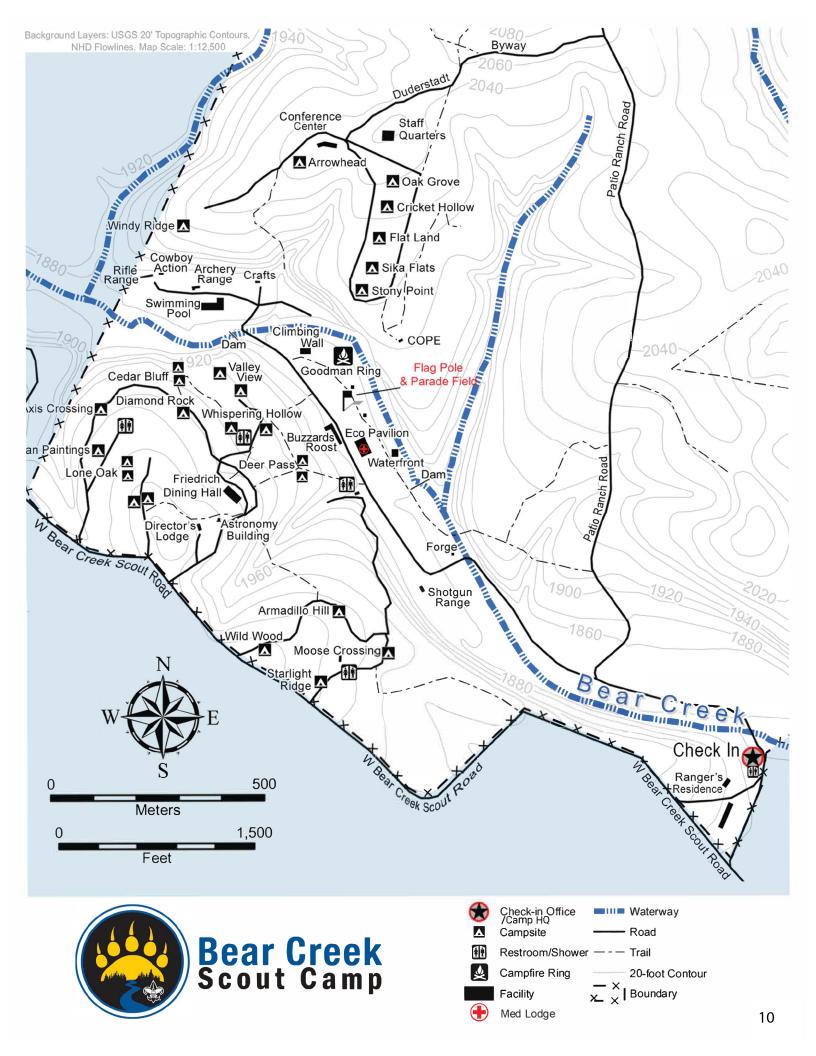
At Akela Adventure, Scouts will accomplish enough activity badge requirements to complete Aquanaut. Other activity badges are partially completed, leaving something for the den leader to accomplish at den meetings. Since you or your will be actively participating with our den during camp, you will know what each Scout has completed and what areas they may need help in when returning from camp. Included in this booklet is the Camp Schedule (Page 9)

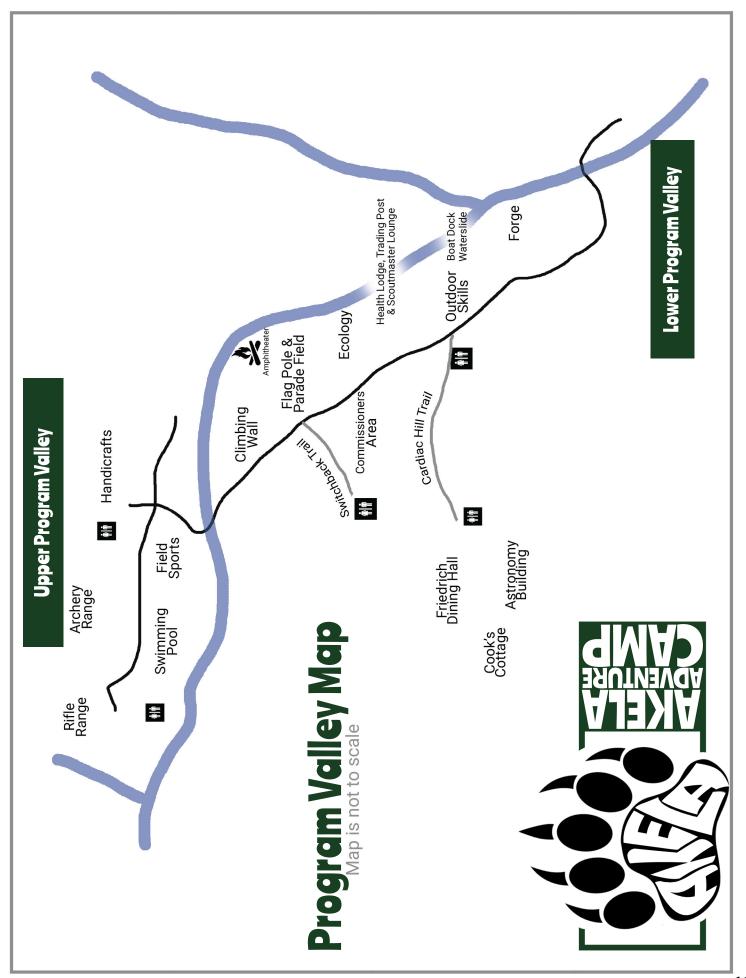


SCHEDULE OF EVENTS

	Day 1	Day 2	Day 3	Day 4	
7:30 am		Breakfast i	n the Dining Hall	Flag Ceremony followed by	
8:45am		Flag Ceremon	y in the Parade Field	Breakfast in the Dining Hall	
9:00 am		Se	ession 1	Break Camp Depart	
10:00 am		Se	ession 2		
11:00 am		Se	ession 3		
12:30 pm					
1:00 pm	Campers arrive at camp Check-in begins Turn in medical forms & medicine		Lunch in the Dining Hall & Rest Period		
2:00 pm	Swim Tests at the pool (upper valley)	Session 4			
3:00 pm	Camp Tours	Session 5	Free Time		
4:00 pm	Camp rours	Session 6 All Areas Open			
5:30 pm	Supper in the Dining Hall (wear field uniforms)				
6:50 pm		Flag Ceremony			
7:00 pm	Leader Orientation In Dining Hall (7:15)				
8:00 pm	Retreat in the Valley Parade Field		Free Time Areas Open		
8:15 pm		Free Time Areas Open			
8:30 pm	Opening Campfire		Flag Ceremony (Valley Parade Field)		
8:40 pm			Closing Campfire		
10:30 pm					

Swim checks will be conducted on Day 1 for as long as time allows. It is highly recommended that Campers have swim tests completed at one of McGimsey Scout Park's scheduled Swim Checks prior to coming to camp. Campers can test during any open pool time. Anyone (youth or adult) wishing to participate in river activities (swim, slide, kayak, paddle board, canoe), or MUST complete a swim test.







UNIFORMS

The official Field uniform is requested at dinner. Adults are also asked to set a good example by wearing their uniforms if you have them. Activity uniforms should be worn during the day (t-shirt and shorts). Bear Creek has rocky terrain, and previous experience has shown that thin-soled tennis shoes cause foot problems for the Scouts. Please consider substantial closed-toe footwear for those attending.

TENTS

Tents will be provided at Camp. All tents are on a wood platform. You are welcome to bring your own tent if you prefer.

Akela Summer Packing List

MAKE SURE TO MARK ALL ITEMS WITH SCOUT'S NAME AND UNIT NUMBER

CAMPING GEAR

Trunk or Footlocker

Drinking Cup or Second Water Bottle

Daypack

Twin Size Sheet/Blanket/Sleeping Bag

Pillow

Cot

Ground Cloth/Tarp

Mosquito Net and Frame

Camp Chair (small/easy to carry)

Headlamp / Flashlight

Battery-power fan

Personal First Aid Kit

Sunscreen

Bug Spray

TOILETRIES

Bath Towels (2)

(one for aquatics, one for showers)

Washcloth

Toilet Paper

Deodorant

Comb / brush

Shower Shoes

Body-wash / Shampoo / Soap

Toothbrush and Toothpaste

Feminine Hygiene / Shaving

Chapstick

Facial wipes

Hand Sanitizer

CLOTHING

Full BSA Field Uniform

Hoodie or Light Jacket

T-shirts (enough for each day)

Shorts or Pants (enough for each day)

Socks (enough for each day)

Underwear (enough for each day)

Shower Shoes

Rain gear/jacket

Hiking boots / closed toe shoes

Hat / cap (for sun protection)

SUGGESTED EXTRAS

Clothes Hanger for Uniform

Sunglasses

Cooling Towel

Camera & film

Compass

Bag for laundry

Spending money for the Trading Post

Camera

Watch

Diatomaceous Earth

Book of Faith

Extra batteries for all items

AOUATICS

Swim Suit

Quick dry towel

Goggles (optional)

Swim Shirt (optional)

Water shoes/sandals for boating area

SCOUTING ITEMS

Scout Handbook

Writing Items (pen/pencil/paper)

Fishing Pole

ITEMS TO LEAVE AT HOME

Knives

Fireworks

Music Devices

Skateboards & scooters

Valuables

Electronic games

Pets

INSECTS

To insure Campers have a good camping experience, please make sure to bring a good insect repellent. BCSC has chiggers, ants, mosquitoes, and occasional ticks. Commercial insect repellents are useful in keeping these pests away. Sublimed sulfur mixed 50/50 with baby powder and sprinkled on the ankles will chiggers away. Avon Skin So Soft has also been found to be useful.



Unit Packing List

BSA Roster w/highlighted participants (4-copies needed) Leader YPT copies Copy of Insurance (out of Council units)

Copy of Insurance (out of Council units)
Scout & Leader Medical Forms (page 16-18)
Pack Flag / US flag (if you have them)
Rope & Twine

Patrol Flags Water Cooler First Aid Kit American Flag Foot Locker (for Valuables) Flagging Tape Medications

Camp Policies & Procedures

INTRODUCTION

It is the goal of Bear Creek Scout Camp (BCSC) to provide a safe, quality program to our campers. In addition to the Scout Oath, Scout Law, Guide to Safe Scouting, and Scouting Code of Conduct, the following rules have been established to ensure the continuation of Bear Creek Scout Camp's excellent safety record.

Leaders are asked to cooperate in the observance of these rules and in the common-sense operation of their troop. For the safety and enjoyment of all scouts in camp, troops unwilling to observe camp rules and policies will be asked to leave. Any questions or comments of these rules and policies can be addressed before camp by emailing BearCreek@AlamoAreaBSA.org. We ask that leaders read all policies and procedures as they may be referred to while at camp and we want to make sure everyone is well informed.

REGISTRATION

Every youth that attends Akela Summer Camp must be a registered member of the Boy Scouts of America. BSA Unit Rosters with participants highlighted must be turned in to the front office upon check-in at camp as proof of registration. Adults for 2-deep leadership must also be registered and listed on the roster (see next paragraph)

UNIT LEADERSHIP

See page 6 for Adult Leadership Requirements

Unit leaders' primary responsibility is the safety of their Scouts, 24 hours a day. Adult leaders are also responsible for the discipline and control of Scouts they bring to camp. BCSC is grateful for any adult leader willing to lend a hand with camp programs.

PARENTS AND VISITORS

In effort to keep accurate records of Scouters at BCSC, and ensure Scout safety, individuals are not permitted on camp property without prior authorization. **All visitors must check in and out at Camp HQ.**

LEAVING CAMP

Anyone leaving camp must sign out at the Camp HQ. The front gate of BCSC will be closed at all times. Scouts will not be allowed to leave camp with anyone other than their parents or legal guardian.

LOST CAMPERS

Please inform staff if you need help finding a lost camper. BCSC staff has procedures in place to search camp safely and quickly. Youth campers should never be sent to search for lost campers.

HEALTH AND SAFETY

The first aid lodge is available with a qualified health officer on duty 24 hours a day that can handle minor accidents and injuries. In addition, BCSC has an agreement with local physicians and hospitals if additional medical treatment is required. In the case of non-life-threatening injury or illness, the unit leader (following 2-deep leadership) will be asked to provide transportation to the hospital or clinic as directed. Parent(s)/Guardian(s) will be immediately notified by the health officer of any serious illness or injury. If parents/guardians are not home during the camp period, notify the camp of their whereabouts. Emergency services will be called in the case of accidents or illness of a more critical nature. There is no charge for medical services performed in camp. All campers needing services from hospitals/clinics are required to handle payment through their insurance policy.

INSURANCE

The Alamo Area Council provides council-wide accident and sickness insurance coverage for all registered Scouts and leaders within the Alamo Area Council.

Scouts and leaders from outside the Alamo Area Council must provide certification that they have troop and/or council insurance coverage. It is necessary that your troop be covered by medical insurance at camp. A copy of your certificate of insurance and necessary information for processing a claim must be on file with the camp medical officer before your troop can camp at BCSC. This allows the BCSC staff to arrange medical services quickly if needed. If your troop does not have insurance, please contact your local council. A national policy is available at a minimal fee.

EMERGENCY DRILL

There will be a camp wide emergency drill within the first day of camp. Emergency procedures will be posted on camp bulleting boards in all campsites. As a rule, Scouts and Scouters hearing vehicle horns honking repeatedly must report immediately to the nearest gathering point without delay. Gathering points are:

If on the Friedrich side of camp - meet at the Dining Hall If on the Rickenbacker side- meet at the conference center If in the Lower Valley - meet at the Eco Pavilion If in the Upper Valley - meet at the Handicrafts Area

It is the responsibility of the leaders to make sure the Scouts are aware of what to do during an emergency. Consult the camp maps on pages 10 and 11 to locate these areas.

Camp Policies & Procedures

MEDICAL RE-CHECK

All Scouts and adult leaders must complete the current Annual Health and Medical Record with parts A, & B if staying at camp for any length of time. The health form MUST have personal insurance information and be signed by the parent or legal guardian for each Scout. If a camper arrives at camp without their medical record, it is the camper's responsibility to obtain the form before being allowed to participate at camp.

MEDICATION

All Prescription Medication must come to camp in the original bottle from the pharmacy.

The Label must Contain:

- The campers name
- Date of prescription
- Doctor's name & phone number
- · Correct dosage

No handwriting will be allowed on prescription medication bottles. All over the counter medication must come to camp in the original containers.

Medication is administered at camp:

- By the Camp Medic, who will keep a written log of medications administered while the Scout is at camp.
- By the legal parent or guardian or unit leader with written permission. A paper log MUST be kept tracking medication name, dose, and time administered to the Scout while at camp even if given by the legal parent or guardian. Logs are subject to inspection by the Camp Medic.

Medical marijuana/cannabis is not authorized for use by Scouts or leaders during their time at camp.

IMMUNIZATIONS

BSA Rules and Regulations require that all participants have current Tetanus immunization prior to attending summer camp.

SWIMMING ATTIRE

Swimsuits must be modest. Outside of aquatics areas all campers are required to wear shirts and shorts or pants.

FOOTWEAR

Campers will need sturdy shoes for hiking and a spare pair in case their shoes get wet. No open toed shoes. Water shoes are encouraged for boating areas. Shower shoes are encouraged for showering.

EVERYBODY GET A BUDDY

No Scout should be without a buddy at camp.

OUIET HOURS

Quiet hours are from 10:00pm to 6:30am.

CAMPSITES & BATHROOMS

Campsite and bathroom cleanliness are the responsibility of the campers who use them. Any damage done to camp property by campers will be the responsibility of the individual's troop. Campsites may be inspected at any time to ensure the health and safety of all campers.

Few campsites have access to electric outlets. Electric is a shared resource between the troops staying in the campsite and special consideration must be made for campers who require electricity for medical purposes.

A Scout is helpful, courteous, and clean, and we ask that troops work together to make sure that restroom facilities are cleaned daily. The camp will supply all necessary items to clean and sanitize restrooms.

Before checking out of camp, the camp staff will inspect all facilities to insure they are clean and free of damage.

CPAP MACHINES

Leaders with CPAP machines are encouraged to bring battery packs for their equipment. Many insurance providers now cover these batteries. The Camp cannot accommodate special campsite requests for electricity.

GARBAGE & FOOD IN CAMPSITES

The Quartermaster Staff will pick up trash nightly before 9:30pm. Bag and place trash on the roadside of the nearest restroom to be collected. No food is allowed inside of tents, food left in campsites must be secured in wildlife-proof container or secured inside a covered trailer.

BCSC is in the country where there are raccoons and other smaller animals who will make a mess of unsecured food or garbage.

PETS/ANIMALS/WILDLIFE

No pets of any kind may be brought to camp. Wild animals are not to be fed, teased or captured. If there is a wild animal that poses a danger to campers, notify the staff. Please remember that camp is in a natural environment. Snakes or other critters will be spotted. If it does not pose a threat, Scouts and leaders should take the opportunity to view nature from a safe distance and does not warrant notifying camp staff. If an animal is found inside a tent, building or in an area that would put Scouts in harms way please call the staff to safely remove the animal.

Camp Policies & Procedures

VEHICLE POLICY

The speed limit on the county road which parallels a portion of BCSC is 30 mile per hour (MPH). The speed limit on roads on camp is 10 MPH with the following exceptions:

- a. The speed limit in the Program Valley (the area after the second low water crossing) is 5 MPH.
- b. The speed limit in campsite areas is 5 MPH.

It is the policy of the Boy Scouts of America that: Seat belts are required for all occupants in vehicles. The driver of any vehicle operated on camp must be at least 18 years of age. The beds of trucks or trailers, or fenders, must never be used for carrying passengers.

Vehicles may be allowed in the campsite to deliver camping equipment on the day of arrival. Units may leave trailers in campsites. Trailer tow vehicles may also remain in the campsite under the following conditions:

- a. The trailer and tow vehicle remain connected throughout the week.
- b. Both the trailer and the tow vehicle are at least three feet from the edge of any camp road.
- c. The tow vehicle is not moved during the week.

All other vehicles must be removed to a designated parking area for the duration of their visit. Driving in the Campsite areas or Program Valley is not permitted.

HANDICAP VEHICLES - NEW FOR 2023

Only vehicles with state issued Disabled Parking placards or license plates may park in designated Disabled Parking spaces.

Driving in the Campsite areas or Program Valley is not permitted unless the participant has a state issued handicap placard. State issued placards are issued as an accommodation for a disability, and therefor should also be noted on the camper's Medical Record.

Vehicles are to be used as a mode of transportation, not as a carpool or shuttle for able Scouters. Likewise, permitted transportation is for essential locations only...not for sightseeing purposes.

If transporting a Scout under the age of 18, all Youth Protection Policies must be met.

Individuals needing accommodation, must have a handicap placard or license plate, and notify the Camp Director via email at BearCreek@AlamoAreaBSA.org by May 15 to ensure the assigned campsite has accessible parking.

GATE POLICY

Perimeter gates MUST remain closed at all times - no exceptions. If you find a gate open or open it, close it.

PROHIBITED ACTIVITIES

The following activities are forbidden and violators may be immediately escorted off camp property.

- 1. Hunting.
- 2. Unauthorized use of all-terrain vehicles.
- 3. Pets.
- 4. Starting fires with gasoline, oil, diesel fuel, lighter fluid, propane, etc.
- 5. Starting fires outside of designated areas. No flames in tents or cabins, this includes lit mosquito coils, candles & hot plates. Please check with the camp staff to see if any burn bans are in effect before starting a fire. When not in use, all fuel (propane, white gas, etc) must be kept locked up.
- 6. Towing passengers on sleds, trailers or any other conveyance not intended for such use. No Scouts or leaders may ride in the back of pickup trucks.
- 7. No other firearms are permitted on camp property. Do not bring your personal firearms, ammunition or bows.
- 8. Use of fireworks.
- Absolutely no alcohol or illegal drugs will be allowed on camp property. Drug and alcohol laws will be strictly enforced according to the laws of the state of Texas. Use of these substances will result in immediate removal from camp.
- 10. Chainsaws are not allowed at camp unless prior permission is received. National BSA has stringent rules for their safe use.
- 11. Use of Tobacco or vaping products.

Part A: Informed Consent, Release Agreement, and Authorization



Full name:		High-adventure base participants:			
Date of birth:		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.		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			
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	photogra at the dis any of the Every per of the par	ction, sale, copyright, exhibit, broadcast, electronic storage, and/or distribution of said aphs/film/videotapes/electronic representations and/or sound recordings without limitatio scretion of the BSA, and I specifically waive any right to any compensation I may have for the foregoing. **erson who furnishes any BB device to any minor, without the express or implied permission arent or legal guardian of the minor, is guilty of a misdemeanor. (California Penal Code 19915[a]) My signature below on this form indicates my permission.			
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,		rmission for my child to use a BB device. (Note: Not all events will include BB devices.)			
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.	☐ Chec	cking this box indicates you DO NOT want your child to use a BB device.			
(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		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.			
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.	List part	ticipant restrictions, if any: None			
I understand that, if any information I/we have provided is found to be inaccurate, it may limit and/Philmont Scout Ranch, Philmont Training Center, Northern Tier, Sea Base, or the Summit Bechtel Re and weight requirements and restrictions, and understand that the participant will not be al met. The participant has permission to engage in all high-adventure activities described, except as parent or guardian's signature is required.	serve, I hav	ive also read and understand the supplemental risk advisories, including height participate in applicable high-adventure programs if those requirements are not			
Participant's signature:		Date:			
Parent/guardian signature for youth:		Date:			
(If participant is und	er the age of	f 18)			
Complete this section for youth participants only: Adults Authorized to Take Youth to and From Events:					
You must designate at least one adult. Please include a phone number.					
Name:	Name: _				
Phone:	Phone: _				
Adults NOT Authorized to Take Youth to and From Events:					
Name:	Name: _				



Part B1: General Information/Health History

B1

Full n	ame:	E High-adventure base participants:				
	of hirth:					
Date	OI DII	or staff position:				
Age:		Gender:	Height (inches):		Weight (lbs.):	
Address	:					
City:		State:	ZIF	code:	Phone:	
		0.:				
		Insurance Company:				
•	Please	attach a photocopy of both sides of the insurance card. If you	do not have medical insu	rance, enter "none" above.		
In case	e of em	ergency, notify the person below:				
Name:_				Relationship:		
Address	:		Home phone:		Other phone:	
Alternate	e contac	t name:		Alternate's phone:		
Hoal	th Ui	story				
		have or have you ever been treated for any of the following?				
Yes	No	Condition		Ex	xplain	
		Diabetes	Last HbA1c percentage	and date:	Insulin pump: Yes 🔲 No 🛚	
		Hypertension (high blood pressure)				
		Adult or congenital heart disease/heart attack/chest pain (angina)/heart murmur/coronary artery disease. Any heart surgery or procedure. Explain all "yes" answers.				
		Family history of heart disease or any sudden heart-related death of a family member before age 50.				
		Stroke/TIA				
		Asthma/reactive airway disease	Last attack date:			
		Lung/respiratory disease				
		COPD				
		Ear/eyes/nose/sinus problems				
		Muscular/skeletal condition/muscle or bone issues				
		Head injury/concussion/TBI				
		Altitude sickness				
		Psychiatric/psychological or emotional difficulties				
		Neurological/behavioral disorders				
		Blood disorders/sickle cell disease				
		Fainting spells and dizziness				
		Kidney disease				
		Seizures or epilepsy	Last seizure date:			
		Abdominal/stomach/digestive problems				
		Thyroid disease				
		Skin issues				
		Obstructive sleep apnea/sleep disorders	CPAP: Yes No			
		List all surgeries and hospitalizations	Last surgery date:			
		List any other medical conditions not covered above				



Allergies/Medications Do You use An EPINEPHRINE Do You use An STHMA RESCUE No No HALER? Exp. date (if yes) No You use An ASTHMA RESCUE No No Allergies or Reaction to any of the following? Yes No Allergies or Reactions Explain Nedication Nedications Nedications Check here if no medications are routinely taken. If additional space is needed, please list on a separate sheet and attach. Medication Dose Frequency Reason Administration of the above medications is approved for youth by: Parent/quardien signature MO/100, NP, or PA signature (if your state requires signature) Paring 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.	Full name:				re base participants:		
DO YOU USE AN PERMEMBRE YES NO DO YOU USE AN ASTMARA RESQUE YES NO NOT YOU YES NO Alterges or Reactions Explain Yes No Alterges or Reactions Yes No Yes Yes	Date of birth: or staff position: or staff position:						
Medication Plants Insect Detectings	Are you allergic to or do you have any adverse	e reaction to any of the followi	ng?	INHALER? Exp. dat	e (if yes)		□ NO
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 list on a separate sheet and attach. Medication Dose Frequency Reason		Ехр	lain		s or Reactions	Explain	
List all medications currently used, including any over-the-counter medications. Check here if no medications are routinely taken.				= =	/stings		
Medication Dose Frequency Reason	List all medications currently used.	including any over-the-	counter medication	IS.			
Modication Dose Proquency Reason					st on a separate sheet an	d attach.	
YES		<u> </u>		•			
Administration of the above medications is approved for youth by: Parent/guardian signature			,,,,,,,,,				
Administration of the above medications is approved for youth by: Parent/guardian signature							
Administration of the above medications is approved for youth by: Parent/guardian signature MD/DO, NP, or PA signature (if your state requires signature)							
Administration of the above medications is approved for youth by: Parent/guardian signature MD/DO, NP, or PA signature (if your state requires signature)							
Administration of the above medications is approved for youth by: Parent/guardian signature							
Administration of the above medications is approved for youth by: Parent/guardian 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			uthorized with these exc	eptions:			
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			/_				
Immunization The following immunizations are recommended. 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. Ves	Parent/gu	ıardıan signature		MD/DO, NP, or PA	signature (if your state requires signa	.ture)	
The following immunizations are recommended. 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. Ves No Had Disease Immunization Date(s)				e sure that they are NOT expired	I, including inhalers and EpiPer	ns. You SHOULD NOT S	STOP taking
The following immunizations are recommended. 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. Ves No Had Disease Immunization Date(s)	<u> </u>						
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) Tetanus Tetanus Diphtheria Diphtheria Polio Measles/mumps/rubella Chicken Pox Hepatitis A Hepatitis B Meningitis Influenza Other (i.e., HIB)	Immunization The following immunizations are recommends	ed Tetanus immunization is re	equired and must have be	een received within the last 10			
Yes No Had Disease Immunization Date(s) Tetanus Fertussis Diphtheria Measles/mumps/rubella Measles/mumps/rubella Diphtheria Do NOT WRITE IN THIS BOX. Review for camp or special activity. Reviewed by: Reviewed by: Date: Further approval required: Yes No Reason: Approved by:	years. If you had the disease, check the disea					nal information abo	out your
Pertussis Diphtheria Measles/mumps/rubella Polio Chicken Pox Hepatitis A Hepatitis B Meningitis Influenza Other (i.e., HIB)				Date(s)			
Diphtheria Measles/mumps/rubella Polio Chicken Pox Hepatitis A Hepatitis B Meningitis Influenza Other (i.e., HIB)							
Measles/mumps/rubella Do NOT WRITE IN THIS BOX. Review for camp or special activity. Reviewed by: Hepatitis A Hepatitis B Meningitis Influenza Other (i.e., HIB)							
Polio Chicken Pox Hepatitis A Hepatitis B Meningitis Influenza Other (i.e., HIB) DO NOT WRITE IN THIS BOX. Review for camp or special activity. Reviewed by: Date: Further approval required: Yes No Reason: Approved by:							
Review for camp or special activity. Reviewed by: Date: Further approval required: Yes No Reason: Approved by: Approved by: Reviewed by: Date: Further approval required: Yes No Reason: Approved by:		s/mumps/rubella			DO NOT WRITE IN THE	DOV	
Reviewed by: Hepatitis A	===	n Dov					
Date:					Reviewed by:		
Meningitis Influenza Other (i.e., HIB) Further approval required:Yes No					Date:		
Reason: Influenza Other (i.e., HIB)					Further approval required:	Yes No	
Approved by:		<u> </u>			Reason:		
					Approved by:		
		<u> </u>	equired)		Date:		



Swim Classification Record

(Changes and/or corrections to the following chart should be initialed and dated by the test supervisor.)

Unit Number		Date	Date of Swim Test			
5.11 N (5 : 1)		Medical	Swim Classification			
	Full Name (Print) (Draw lines through blank spaces)	Recheck Parts A-B	Non-Swimmer	Beginner	Swimmer	
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
coun Resc	swim classification test performed at a unicil-approved resource people: Aquatics Instructor, or other lifeguard, swimming instructor, Aquatics Supervision Guide.	ructor, BSA	A; BSA Lifegua	ırd; BŠA Swi	mming & Wate	
	IE OF PERSON SUPERVISING & FACILITA	ATING THE				
	e of Authorization/Training a copy of certification if required by council procedure)	Expirat	ion Date if app	licable		

SWIM CLASSIFICATION PROCEDURES

The swim classification of individuals participating in a Boy Scouts of America activity is a key element in Safe Swim Defense and Safety Afloat. These swim classification tests are a foundational unit of the Aquatics Continuum.

All persons participating in BSA aquatics are classified according to swimming ability. The classification tests and test procedures have been developed and structured to demonstrate a skill level consistent with the individual's circumstances in the water.

SWIM TESTS FOR COUNCIL ACTIVITIES

Swim tests for *council activities* are conducted following procedures approved by a council-level committee, preferably the Council Aquatics Committee. The council committee should use the guidance contained in <u>BSA Aquatics Management Guide</u>. SPECIAL NOTE: When swim tests are conducted away from camp, the camp aquatics director retains the right to review or retest any or all participants to ensure that standards have been maintained.

REGARDLESS OF WHERE OR WHEN THE SWIM TEST IS GIVEN THE FOLLOWING PROCEDURES APPLY:

- <u>The test is given one-on-one.</u> The test administrator and the swimmer are buddies during the administration of the test.
- Each component of the test is important. The test must not be changed either to assist the Scout or to expedite the process.
- The test must be completed without aid or support. Aid includes lifejackets, wetsuits, fins, etc. Swim goggles may be used to avoid eye irritation.
- Swim tests must be renewed annually, preferably at the beginning of the outdoor season.

TO THE SWIM TEST ADMINISTRATOR

SWIMMER'S TEST:

Jump feet first into water over the head in depth, level off, and begin swimming. Swim 75 yards in a strong manner using one or more of the following strokes: side stroke, breaststroke, trudgen, or crawl; then swim 25 yards using an easy resting back stroke. The 100 yards must be swum continuously and include at least one sharp turn. After completing the swim, rest by floating.

BEGINNER'S TEST:

Jump feet first into water over the head in depth, level off, swim 25 feet on the surface, stop, turn sharply, resume swimming as before, and return to starting place.

Anyone who has not completed the beginner or swimmer tests is classified as a **nonswimmer**.

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NUTRITION / ALLERGIES



Our dining hall will make modifications to fit special dietary needs. This Special Dietary Roster will inform the staff of the products that the Scout is allergic to. Please email this completed form, or the details of your Scout's needs to BearCreek@AlamoAreaBSA.org by May 15.

Troop Number _	Council	
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Special Dietary Need / Allergies