



LIÊN ĐOÀN BẮC ĐẦU

A Multi-Level Vietnamese Scouting Unit
Cub Scouts – Boy Scouts – Girl Scouts – Venturing

You are cordially invited to attend LD Bắc Đầu's first camping trip held on Friday November 10th to Sunday November 12th. Please see below for important details and the permission slip on page 2.

Campground

- Camp Warren McConnell (BSA)
- 11760 Livingston Cressey Rd. Livingston, CA 95334
- Amenities: Dining hall, restrooms, and kitchen

Camp Details

- Check-in – 12PM Friday (11/10/17)
 - o We encourage everyone to check-in by no later than 7PM Friday night.
- Check-out – 12PM Sunday (11/12/17)
- Camp fee - \$50
 - o **Due date is Sunday 10/29/17 (Cash or check)**
 - o Includes meals, camp registration fee, and long sleeve shirt
- Pack in, pack out trash policy
 - o There are no dumpsters on the campground so we must follow the policy of whatever we bring to camp, we bring home. "Leave No Trace."

Emergency Contacts

- Maurice Le: (408) 364-5814
- Katrina Huynh-Le: (408) 218-3992
- Khanh Tran: (408) 209-7502
- Greater Yosemite Council, BSA: (209) 545-6320

Directions

From San Jose, CA

- Take 101 S
- Exit CA-152 E and turn left onto CA-152 E towards Pacheco Pass Rd
- Continue to follow CA-152 E and go past I-5
- Left on Volta Rd
- Right on Ingomar Grade
- Left on Ingomar Grade S
- Ingomar Grade S turns into Volta Rd
- Right onto Henry Miller Ave
- Left on CA-165 N
- Slight Right onto Westside Blvd
- Left on Washington Blvd
- Right on Vinewood Ave
- Vinewood Ave turns into B St
- Left on Main St
- Continue onto Livingston Cressey Rd, destination is on the left

What do I need to bring to camp?

- Personal toiletries (tooth brush, paste, etc)
- Full uniform
- Cup and/or bottle
- Utensils (fork, spoon, knife)
- Bowl and/or plate
- Sleeping bag
- Extra clothing
- Jacket/sweater
- Flash light
- Socks
- Comfortable shoes (closed toe only)
- Towel (optional)
- Notebook with pen or pencil
-

San Jose, California, USA

Email: LDBD_Leaders@googlegroups.com

<http://bacdau.org>



LIÊN ĐOÀN BẮC ĐẦU

A Multi-Level Vietnamese Scouting Unit
Cub Scouts – Boy Scouts – Girl Scouts – Venturing

ACTIVITY CONSENT FORM AND APPROVAL BY PARENTS OR LEGAL GUARDIAN

The recommended use of this form is for the consent and approval for Cub Scouts, Boy Scouts, Varsity Scouts, Ventures, and guests to participate in a trip, expedition, or activity.

First name of participant _____ Middle initial _____ Last name _____

Birth date (month/day/year) ____ / ____ / ____ Age during activity _____ T-Shirt size _____ Unit _____

Address _____

City _____ State _____ Zip _____

Has approval to participate in (name of activity, outing trip, etc.) _____ From _____ to _____
(Date) (Date)

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 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 my child, I understand that efforts will be made to contact me. In the event I cannot be reached, permission is hereby given to the medical provider to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child. Medical providers are authorized to disclose protected health information to the adult in charge 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.

With appreciation of the dangers and risks associated with programs and activities including preparations for and transportation to and from the activity, 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.

NOTE: 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. List any restrictions imposed on a child participant in connection with programs or activities below and counsel your child to comply with those restrictions.

List participant restrictions, if any: _____

None

Participant's signature _____

Date _____

Parent/guardian printed name _____

Parent/guardian signature _____

Date _____

(If participant is less than 18 years of age)

Area code and telephone number (best contact and emergency contact) _____

Email (for use in sharing more details about the trip or activity) _____

Contact the adult leader with any questions:

Name _____

Phone _____

Email _____

San Jose, California, USA

Email: LDBD_Leaders@googlegroups.com

<http://bacdau.org>