

**Boy Scout Troop 76**  
Ridgefield, Connecticut

*The Official*  
**Equipment List**

**Event: March 2016**

**William H Pouch Boy Scout Camp, 1465 Manor Road, Staten Island**

**Clothing**

- Class "A" Uniform
- Class "B" Uniform
  
- Winter Parka
- Warm Jacket
- Light Jacket or Windbreaker
- Sweater or Sweatshirt
- 1 set; Extra Pants, Shirt, Socks and Underwear
- Long Underwear
- Snow or Ski Pants
  
- Wool Socks
  
- Sock Liners
- Cotton Socks
- Gloves
  
- Hat, Scout
- Hat, Wool
- Rain Gear or Poncho
- Boots, Winter
- Boots, Hiking or Work
- Sneakers
- Bathing Suit

**Equipment**

- Backpack or Large Duffel Bag
- Sleeping Bag (4 Season)
  
- Sleeping Pad (for those in tents)
- Blanket
- Mess Kit
- Eating Utensils
- Flashlight
  
- Extra Bulb and Batteries
- Pocket Knife & Totin' Chip Card
- 1,1- Quart Water Bottle or Canteen filled with water)
  
- Map(s)
- Camp Chair
- Matches
- Fire starter (for those in tents)
- Kindling (for those in tents)
- First Aid Kit – personal
- Whistle
- Rope
- Repair Kit
- Bear Bag
- Day Pack

**Personal**

- PERMISSION SLIP
- HEALTH FORM/ Medication Consent Form
- Soap
- Shampoo
- Toothbrush
- Toothpaste
- Small Mirror
  
- Comb or Hairbrush
- Toilet Paper
- Plastic Trash Bags (2)
  
- Small Towel
- Beach Towel (2)
- Bandanna
  
- Insect Repellent
- Coins (for Emergency)
- Emergency Medical Information
- Prescription Medication (give to adult leader)
- Sunglasses
- Sunscreen
- Snacks
- Money (\$30-\$50 for lunch, dinner and sovenoirs, if any)

**Optional**

- Hiking Staff
- Camera & Film
- Fishing Rod & Tackle
- iphone for taking pictures.  
If used for anything else, will be confiscated.

**DO NOT BRING** (will be confiscated and returned to a parent)

- Electronic Devices (Game Boy, ipod, Radio, CD or Tape Player, Laptop Computer, Television, etc.)
- Water Guns (Pistol, Pump-action, etc.)
- Sheath Knives (any fixed-blade knife, bowie, etc.)

**Boy Scout Troop 76**  
**Ridgefield, Connecticut**

**Participation Consent Form**

**Trip:** NYC Heritage Trip William H Pouch Boy Scout Camp, 1465 Manor Road, Staten Island

**Date:** Friday, March 18– Sunday, March 20th

**Meet at:** Jesse Lee Parking Lot: Friday, March 18, 2016 at 3:45p.m.

**DO NOT BE LATE!**

**Pickup:** Jesse Lee Parking Lot: Sunday, March 20,  
Approx 9am if leaving from camp  
Approx 2:45pm if doing Statue of Liberty Tour/Ellis Island tour

**In case of Emergency, contact Troop through:**

ASM Mike Grissmer – 203 994-4586

SM Matthew Breitenbach – 203 858-5894; [mbreitenbach@r4cloud.com](mailto:mbreitenbach@r4cloud.com)

ASM Randy Carlson – 203 685-8990; [randy.carlson@mac.com](mailto:randy.carlson@mac.com)

***Dear Parent:** This form is necessary and required for each and all troop activities. No individual will be permitted to attend this trip unless this form is signed and returned to Troop 76 prior to the departure for the trip. We will do everything reasonably within our power to provide for the safety of each participant. It is our intent to provide adequate adult supervision through the Troop leaders and parent volunteers that will attend this trip.*

\* \* \* \* CUT TOP AND SAVE \* \* \* \*

-----  
**Trip:** NYC Heritage Trip , New York City; Camping at William H Pouch Boy Scout Camp, 1465 Manor Road, Staten Island

**Date:** Friday-Sunday , March 18 – Sunday, March 20

*In consideration of the benefits to be derived, and in view of the fact that the Boy Scouts of America is an educational, nonprofit institution, membership and participation in which is voluntary, and having full confidence that every reasonable precaution will be taken to ensure the safety of the participant named below on this activity, I hereby agree to his participation and waive all claims against the leaders of this trip, officers, agents, and representatives of the Boy Scouts of America, this Troop, and the sponsor.*

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

Any condition now requiring medication?                       No  Yes

Name of medication & dosage: \_\_\_\_\_

Any restriction of activity for medical reasons?                       No  Yes

If Yes, explain in detail: \_\_\_\_\_

Special medical instructions (e.g. drug or food allergies): \_\_\_\_\_

*In the event I cannot be reached in an emergency, or if an attending physician or health care provider believes immediate medical care is required without delay, I hereby give permission to the physician or health care provider, selected by the adult leader, to secure medical treatment, hospitalize, secure anesthesia, or to order injection or surgery for the participant named above, at my expense.*

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

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

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Health Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_