



TROOP 175 POOP SHEET

BSA Troop 175 | Decatur, Georgia | www.troop175.com



Hiking Trip along Appalachian Trail at Blood Mountain: March 27, 2021

WHAT:	Hiking Trip: A +/- 10 mile hike for Hiking Merit Badge.
WHERE:	Woody Gap / Lake Winfield Scott / Blood Mountain (specific trailhead parking area TBD)
LEAVE:	7:00 a.m. Saturday, March 27 from the Scout Hut parking lot (Be at Scout Hut a few minutes EARLY so we can depart on time).
RETURN:	Saturday, March 27 about 6:00 p.m. to the Scout Hut parking lot.
FOOD:	BRING 2 liters of water and any trail snacks you prefer.
NOTES:	Click here to enter text.

EMERGENCY CONTACT: David Leonard – 404-664-8311 | WE TRAVEL IN CLASS A UNIFORM

INDIVIDUAL	WEAR	PACK	INDIVIDUAL	BRING	PATROL	BRING
Class A Uniform	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sleeping bag & pad	<input type="checkbox"/>	Tarp	<input type="checkbox"/>
Jacket & hat	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Tent, pegs, poles	<input type="checkbox"/>	Cook kit	<input type="checkbox"/>
Old shoes	<input type="checkbox"/>	<input type="checkbox"/>	Ground cloth	<input type="checkbox"/>	Stove & fuel	<input type="checkbox"/>
Rainwear	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Compass & matches	<input type="checkbox"/>	Dish-wash kit	<input type="checkbox"/>
Sweatshirt/warm shirt	<input type="checkbox"/>	<input type="checkbox"/>	Backpack / daypack	<input checked="" type="checkbox"/>	Trash bags	<input type="checkbox"/>
Class B t-shirt	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toilet kit (with TP!)	<input checked="" type="checkbox"/>	First-aid kit	<input checked="" type="checkbox"/>
Extra clothing	<input type="checkbox"/>	<input type="checkbox"/>	Flashlight	<input type="checkbox"/>		
Extra shoes	<input type="checkbox"/>	<input type="checkbox"/>	Folding pocket knife	<input type="checkbox"/>	Other: mask to wear	<input checked="" type="checkbox"/>
Swim suit & towel	<input type="checkbox"/>	<input type="checkbox"/>	Eating utensils	<input type="checkbox"/>	Other: Water Purification tablets	<input checked="" type="checkbox"/>
Bug repellent	<input type="checkbox"/>	<input type="checkbox"/>	Canteen/water bottle	<input checked="" type="checkbox"/>	Other:	<input type="checkbox"/>
Sunscreen	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Moleskin	<input checked="" type="checkbox"/>	Other:	<input type="checkbox"/>

PERMISSION TO PARTICIPATE AND WAIVER OF RESPONSIBILITY

In consideration of the benefits to be derived and in view of the fact that the Boy Scouts of America is an educational institution, membership in which is voluntary, and having full confidence that every precaution will be taken to ensure the safety and well-being of my son, _____, on the trip to Appalachian Trail near Blood Mountain, I agree to his participation and waive all claims against the leaders of this trip, officers, agents, and representatives of the Boy Scouts of America, and the Troop's sponsoring Organization. In the event of an emergency, the leader of the activity has my permission to obtain medical treatment for my son at the nearest hospital or doctor, at my expense.

Allergies? Please list (esp. food or insects): _____

Cost: \$0.00 Please circle: **Cash** **Check** (payable to Troop 175) **Use my Scout Funds**

Parent/Guardian Name _____ Signature _____ Date _____ Cell Phone _____

DEADLINE:** Scout must turn in signed permission form & payment by: **Saturday, March 20