

Camp Olmsted

2011

Forms and Lists

PLEASE FEEL FREE TO REPRODUCE ANY OF THE
FOLLOWING PAGES FOR YOUR UNIT .

CAMP OLMSTED UNIT REGISTRATION FORM

Troop # _____

UNIT POINT OF CONTACT:

Name: _____

Address: _____

Town: _____ Zip: _____

Phone: _____ Email: _____

CAMPING PROGRAM (check one):

_____ Boy Scout Resident Camp

Number of Youth _____

Number of Adults _____

Discounts (Volunteering, Multiple Family, etc.)

TOTAL REMAINING CAMP FEES: _____
(TO BE PAID IN FULL BY May 1)

Chief Cornplanter Council Youth Payment Roster

	Last Name	First name	Amt Paid	Date	Campership	Total Paid	Date
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							

CAMPERSHIPS FOR CHIEF CORNPLANTER COUNCIL SCOUTS

Camping and other outdoor activities are an integral part of Scouting. Indeed, it is impossible to enjoy the full benefits of the Scouting program without attending Cub Scout Day Camp, Cub Resident Camp, Boy Scout Summer Camp, or taking part in a High Adventure Activity.

We feel so strongly about the outdoor program that we have made a commitment that no young person will be denied a camp experience due to financial constraints. But a Scout must participate and help his own unit raise funds. And the unit must use the national model of annual budgeting, individual sales goals for the boys, and keeping track of individual Scout accounts. To that end, the Chief Cornplanter Council has established a *Campership Fund* to assist our Scouting families.

The Campership Committee will consider any camp scholarship application for camping at Camp Olmsted. No camperships will be awarded to boys attending other Council's camps.

We ask that every effort be made by your Scout and his unit to provide a portion of the camp fee. In the words of the Scout Law...."A Scout is thrifty....he works to pay his way and to help others. He saves for the future. He carefully uses time and property." The Chief Cornplanter Council is willing to fund up to 50% of a boy's camp fee if need is demonstrated after he has attempted to reach his unit sales goal.

While funds are limited, I would again stress that we are committed to providing scholarship assistance to ensure that every youth member attend camp. In order to fairly distribute available funds the deadline for campership requests is **April 15.** However, if a family situation changes or if a boy decides to attend camp after this deadline, please be assured that we will consider a family's request. The form must be signed by the Cubmaster or Scoutmaster prior to submission, as well as the parent or guardian of the Scout. All requests for aid will be treated in a confidential manner.

We sincerely hope to see every Scout and at Camp Olmsted this summer.

Yours in Scouting,

Kevin J. Bonner
Scout Executive

CHIEF CORNPLANTER COUNCIL, BSA

CAMPERSHIP APPLICATION

(please print all information legibly)

Youth name: _____ Pack/Troop (circle one) # _____

Parent/guardian name: _____

Daytime phone _____

Total Camp Fee: \$ _____

Portion paid by Scout or family: \$ _____

Portion paid by Unit: \$ _____

Portion paid by Chartered Organization: \$ _____

BALANCE: \$ _____

Amount requested in campership funds: \$ _____

NOTE: Camperships are awarded based on a camper's need. The Chief Cornplanter makes every effort to ensure that all boys have an opportunity to attend summer camp, regardless of need. **The Council is only able to fund camperships up to 50% of the total camp fee.** Boys requesting camperships must show that they have made an effort to help their unit fund-raisers and to achieve their individual fund-raising goal. The unit leader must sign this form, agreeing that the Scout made every attempt to help his unit raise funds to operate. The Scout himself should help to pay his own way, contributing some portion of the camp fee, based on how much he has in his Individual Scout Account in his Unit. In addition, his family, Scouting unit and chartered organization should be asked to help support the Scout's attendance at Camp before this form is submitted. All camperships must be submitted to the Betts Scout Service Center by April 15 and all are assessed in a confidential manner. Your unit leader will be notified before the May 1 camp payment date as to what amount has been approved.

CAMPERSHIPS WILL ONLY BE AWARDED TO BOYS IN UNITS WHO HAVE WORKED OUT AN ANNUAL BUDGET, PROVIDED THEIR BOYS WITH A PER-BOY SALES GOAL TO ACHIEVE THEIR BUDGET, AND MAINTAIN INDIVIDUAL SCOUT FUND-RAISING ACCOUNTS FOR ALL BOYS IN THEIR UNIT.

I have read the above statement and agree to its terms _____
(parent/guardian signature)

I attest to the financial need of this Scout. We have communicated the per-boy sales goal to him at the beginning of the year and have been keeping track of his individual Scout account

(unit leader signature)

Unit Youth Roster

Troop/Crew Number: _____

Leader Name: _____

Last Name	First Name	Health Form Y/N	Shirt Size
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

Unit Adult Roster

Troop/Crew Number: _____

Leader Name: _____

Last Name	First Name	Health Form Y/N	Shirt Size \$15.00 Ea.
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

Camp Olmsted Swim Classification Procedures & Pre-testing

The swim classification of individuals participating in a Boy Scouts of America activity is a key element in both Safe Swim Defense and Safety Afloat. The swim classification tests must be renewed annually within the calendar year of attending summer camp. Traditionally, the swim classification test has only been conducted at a long-term summer camp. However, there is no restriction that this be the only place the test is conducted. It may be more useful to conduct the swim classification prior to a unit going to summer camp.

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 circumstances in which the individual will be in the water. The swimmer's test demonstrates the minimum level of swimming ability for recreational and instructional activity in a confined body of water with a maximum 12-foot depth and with shallow water footing or a pool or pier edge always within 25 feet of the swimmer.

The various components of each test evaluate the several skills essential to the minimum level of swimming ability. Each step of the test must be followed as listed below:

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, breast stroke, 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.

NON-SWIMMER:

Anyone who was either unable or does not wish to complete either of the two swimming tests above.
Shallow end only!

ADMINISTRATION OF CLASSIFICATION TEST

OPTION A (at camp):

The swim classification test is completed the first day of camp; by camp Aquatics personnel.

OPTION B (At unit level with approved aquatics resource people):

The swim classification test done at a unit level must be conducted by an individual with at least one of the following certifications: Aquatics Instructor, BSA; Aquatics Supervisor, BSA Lifeguard; certified lifeguard; swimming instructor; or swim coach. When the unit goes to a summer camp, each individual will be issued an official buddy tag under the direction of the Camp Aquatics Director for use at the camp.

SPECIAL NOTE:

When swim tests are conducted away from camp or at the point of activity, the aquatics director shall at all times reserve the authority to review or retest all participants to ensure that standards have been maintained. Unit must still participate in the camp aquatics orientation session on the first day of camp at the aquatics area. Use the unit swim classification record form found in this summer camp leaders guide.

UNIT SWIM CLASSIFICATION RECORD

(Must bring at least three copies of this form to camp: copies to aquatics, office, unit.)

This is the individual's swim classification as of this date. Any change in status after this date (i.e., non-swimmer to beginner or beginner to swimmer), would require a reclassification test by the Camp Aquatics Director.

SPECIAL NOTE: When swim tests are conducted away from camp or at the point of activity, the Aquatics Director shall at all times reserve the authority to review or retest all participants to assure that standards have been maintained. Unit must still participate in the camp aquatics orientation session on the first day of camp at the aquatics area.

Unit Number _____

Date of Swim Test Location of Swim Test _____

	FULL NAME (Please Print)	Swim Classification		
		Non-swimmer	Beginner	Swimmer
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

Name of Troop Leader _____
(Print)

Name of Person Conducting Test _____

Signature _____

Phone Number _____

Print Address _____

Signature - Camp Aquatics Director _____

Type of Certification Held - Expiration

REQUEST FOR CAMP REFUND

Camp Refund Policy

If a Scout's cancellation affects your total number of boys in attendance, your unit may be eligible for a refund. Refunds are not automatic. They must be requested on this form.

All requests must be received by September 1 and must have the Unit Leader's approval (signature). Also, we must be notified during check in that your numbers have changed. All requests will be subject to a \$30 cancellation fee. **BASIC FEES ARE TRANSFERABLE AMONG CAMPER'S WITHIN THE UNIT.**

The only circumstances under which refunds will be granted are as follows:

- 1) Illness prevents attendance at summer camp
- 2) Illness (include doctor's note) or death of immediate family prevents attendance at camp.
- 3) Family relocation makes attendance at camp impossible or impractical
- 4) Mandatory attendance at summer school which is verifiable.
- 5) A camper leaves camp for medical reasons (**HOME SICKNESS IS NOT CONSIDERED A REFUNDABLE MEDICAL REASON**). Must be certified by the Camp Health Officer. In such cases, the camper will receive a pro-rated refund for the unused portion of his camp fee if the unused portion constitutes three or more days and the medical excuse is not due to horseplay while in camp or negligence of said camper.
- 6) Scout's parents or Scout Leader must submit this form to the Betts Scout Service Center prior to September 1 of the year the request is asked. Do not turn this form into the camp office. Refunds will not be processed until after September 30 and may take up to 90 days to process.

NOTE – ABSOLUTELY NO REFUNDS WILL BE GRANTED FOR NO-SHOWS

Scout Name _____

Troop#/Pack# _____

Address _____

City/State/Zip _____

Home Phone _____

Parent/Guardian name _____

Reason for Refund

Amount paid for camp \$ _____

Amount of refund request \$ _____

Campership Awarded (if any) \$ _____

Unit Leader Authorization _____

Date _____

PRE-CAMP CHECKLIST

- Contact the Order of the Arrow Camp Promotions and Unit Elections team. Schedule a Parents' Night camp promotion meeting
- Promote camp
- Hold individual conferences with each Scout to determine which Merit Badges to sign-up for. Bring Completed blue card for each badge for each Scout to camp.
- Collect payments from all Scouts. Bring fees, Troop Registration forms and Merit Badge Sign-Up forms to the Betts Scout Service Center by May 1, 2011.
- Check all medical forms for required signatures and immunization dates (month and year). Remember, Everyone must have a physical exam within twelve (12) months of camp. Double check the lower front section of the youth medical form for an updated parent signature. **Be sure to bring the forms to camp.**
- Complete and bring TWO (2) Copies of the Camp Unit Roster. One copy must be presented upon check-in at the Camp Office, **the second copy is to be posted in your campsite.**
- Accumulate the Friday Night Meal reservations for all guests of your Unit. Have your meal reservations with you at Saturday check-in! **This will be the only opportunity to make reservations for the Friday night meal.**
- Receipts: Please bring all your copies of receipts issued for summer camp fees, to assist in payment verification, if necessary.
- Develop unit program plans for Outdoor Cooking, Outposts, and Merit Badges.
- Promote camp.

OVER THE COUNTER"OTC" Medication

We are delighted your son will be camping at Camp Olmsted this summer! We would like to inform you of the Chief Complanter Council's policy on medication at Scout camp. This policy was developed to comply with the National Standards of the Boy Scouts of America and the requirement of the Commonwealth of Pennsylvania.

The Camp Olmsted Medical Director and other Health lodge Staff reserve the right to make medical decisions regarding the participation of individuals at camp.

It is a condition of your child's attending camp that you grant permission to the Health Lodge Staff, to treat your child for emergency or necessary health concerns. This may include providing these OTC medications listed below to your child should they develop any of the following conditions or other medications as deemed necessary by the camp physician.

Colds - Robitussin DM, Throat Lozenges, Chloroseptic Spray, Sudafed for daytime or Dimetapp at bedtime,

Sprains - Ibuprofen-Motrin, Advil, Acetaminophen-Tylenol, Naproxen-Aleve,

Constipation - Milk of Magnesia, Glycerin Suppository

Swimmer's Ear - Cortisporin Otic Drops

Diarrhea - Pepto Bismol pr Imodium AD

Allergies - Benadryl

Wounds - Bacitracin Ointment, Betadine

-Or other medications so recommended by our camp physician.

-Participants will not be charged for medications provided by the health lodge.

If your child is allergic to any of the above listed OTC drugs or has other allergies, please explain below.

My son is allergic to:

COUNCIL POLICY ON PRESCRIPTION MEDICATION AT CAMP.

To prevent problems with giving your child's medication, your child MUST have this form completed for any prescription medication and submitted with their BSA Health Form.

**MEDICATION CAN NOT BE GIVEN TO YOUR CHILD
UNLESS THE CAMP IS IN RECEIPT OF THIS FORM.**

Signature of Parent/Guardian _____ Date _____

COUNCIL POLICY ON PRESCRIPTION MEDICATION AT CAMP. To prevent problems with giving your child's medication, your child MUST have this form completed for any prescription medication with their BSA Health Form. MEDICATION CAN NOT BE GIVEN TO YOUR CHILD ULESS THE CAMP IS IN RECEIPT OF THIS FORM.

Directions to Camp Olmsted

From Jamestown, NY

From I-86.

Head south on SR-62 through Russell, PA.

Just beyond Russell, look for the Warren Mall on the left.

Just past the mall, turn left at the stoplight onto Hatch Run Road.

Follow Hatch Run Road to a stop sign, about 5 miles. This is a "T intersection".

Turn left onto Scandia Road.

Follow Scandia Road about 5 miles.

Key land marks along the way:

The old Scandia Elementary School on the left

Scandia Volunteer Fire Department is on the right.

Elk Township building is on the right.

Look for the large brown "CAMP OLMSTED" sign on the right at the entrance to Roper Hollow Road.

Turn right onto Roper Hollow Road.

While on Roper Hollow Road, turn right when you see the Dead End sign.

Follow Roper Hollow Road till it forks (about 3 miles).

Take the left fork into camp.

Follow the road into camp about 1 mile

The road will turn into a three-way split; follow the middle road in the camp's parking lot.

Directions to Camp Olmsted

From Erie, PA

Drive east on SR-6 towards Warren.

East of Youngsville, SR-6 and 62 merge into one roadway. Stay on them into Warren.

In Warren, SR-62 splits off SR-6 at the Ludlow Street Exit.

Follow SR-62 through Warren on Pennsylvania Avenue.

In the center of town, SR-62 turns north on Market Street.

Follow SR-62 North to the area of the Warren Mall. (This is just beyond the Warren State Hospital on the right)

Look for the Warren Mall on the right. An ARBY'S restaurant is on the corner.

Turn right at the stoplight onto Hatch Run Road.

Follow Hatch Run Road to a stop sign, about 5 miles. This is a "T intersection".

Turn left onto Scandia Road.

Follow Scandia Road about 5 miles.

Key land marks along the way:

The old Scandia Elementary School on the left

Scandia Volunteer Fire Department is on the right.

Elk Township building is on the right.

Look for the large brown "CAMP OLMSTED" sign on the right at the entrance to Roper Hollow Road.

Turn right onto Roper Hollow Road.

While on Roper Hollow Road, turn right when you see the Dead End sign.

Follow Roper Hollow Road till it forks (about 3 miles).

Take the left fork into camp.

Follow the road into camp about 1 mile

The road will turn into a three-way split; follow the middle road in the camp's parking lot.

Directions to Camp Olmsted

From eastern PA

Head west on I-80.

Get off I-80 at the old Exit 18. Follow the exit ramp off I-80 and onto SR-153. Head towards Penfield (past the entrances to SB Elliott State Park and Parker Dam State Park).

At the light in Penfield, go straight across SR-255 and continue to follow SR-153 till it comes to a 'T' intersection with SR -219.

Turn north onto SR-219 and follow it into Ridgeway.

In Ridgeway, SR-219 turns right at the SHEETZ. Go straight through the stoplight and follow SR-948 out of town.

Continue on SR-948 into Sheffield.

In Sheffield, turn left onto SR-6 and head west towards Warren.

Just past the intersection with SR-59, turn right across the Glade Bridge. At the end of the Bridge, turn left onto Pennsylvania Avenue East.

Follow Pennsylvania Avenue through town. Just beyond the bridge crossing Conewango Creek turn right onto Market Street (CVS Drugstore is on the corner)

Market Street becomes SR-62

In the center of town, Route 62 turns north on Market Street.

Follow SR-62 North to the area of the Warren Mall. (This is just beyond the Warren State Hospital on the right).

Look for the Warren Mall on the right. An ARBY'S restaurant is on the corner. Follow directions from here as above.

CAMP OLMSTED

I attended summer camp at

Serving youth since 1927



DAILY CAMP SCHEDULE

SATURDAY

8:00 Staff Reports
9:00 Troop Check-In Begins
9:00 Campsite set up and swim tests*
begin
12:30 Lunch
4:00 SM/SPL/Leaders Meeting
5:50 Retreat
6:00 Dinner
8:30 Opening Campfire
10:30 Taps

SUNDAY - THURSDAY

6:30 Morning Program Events
7:50 Colors
8:00 Breakfast
9:00 Program Areas Open
12:20 Program Areas Close
12:40 Assembly
12:50 Lunch
2:00 Program Areas Open
5:20 Program Areas Close
5:50 Retreat
6:00 Dinner
7:00 Evening Program Events
10:00 Taps

FRIDAY:

6:30 Morning Program
7:50 Colors
8:00 Breakfast
9:00 Program Areas Open
12:20 Program Areas Close
12:40 Assembly
12:50 Lunch
2:00 Campwide Program
5:00 Program Areas Close
5:50 Retreat
6:00 Family Night Dinner
7:00 Closing Campfire

*(Swim test times will be assigned at registration.)

CAMP OLMSTED TROOP CAMP ROSTER

UNIT #: _____ COUNCIL: _____

CAMPSITE: _____

WEEK # 1 2011
(PLEASE CIRCLE THE WEEK NUMBER)

CHIEF CORNPLANTER COUNCIL

BOY SCOUTS OF AMERICA

SCOUT MASTER:		AGE:		FEE:	
ASST. SCOUT MASTER:		AGE:		FEE:	
OTHER LEADERS:		AGE:		FEE:	
		AGE:		FEE:	
		AGE:		FEE:	
		AGE:		FEE:	

Patrol Name:		Patrol Name:	
Patrol Leader:		Patrol Leader:	
Member:		Member:	
Member:		Member:	
Member:		Member:	
Member:		Member:	
Member:		Member:	
Member:		Member:	
Member:		Member:	
Member:		Member:	
Member:		Member:	

CAMP OLMSTED UNIT ANALYSIS FORM

DIRECTIONS: Please fill out and turn in when your unit checks out.

UNIT #: _____ COUNCIL: _____

CAMPSITE: _____ WEEK # 1 2011

UNIT LEADER: _____ PHONE # _____

SENIOR PATROL LEADER: _____ # OF PATROLS: _____

_____ NUMBER OF REGISTERED SCOUTS IN YOUR UNIT

_____ NUMBER OF REGISTERED SCOUTS ATTENDING CAMP

_____ NUMBER OF ADULTS IN CAMP

_____ NUMBER OF FIRST CLASS OR ABOVE SCOUTS IN UNIT

_____ NUMBER OF FIRST CLASS OR ABOVE SCOUTS IN CAMP

_____ NUMBER OF FIRST YEAR SCOUTS IN UNIT

_____ NUMBER OF FIRST YEAR SCOUTS IN CAMP

_____ NUMBER OF MERIT BADGES EARNED AT CAMP

_____ NUMBER OF RANK ADVANCEMENTS MADE AT CAMP

_____ NUMBER OF SCOUTS PARTICIPATING IN A HIGH ADVENTURE PROGRAM

(SCOUTMASTERS SIGNATURE)

(DATE)

CAMP OLMSTED

CAMP EVALUATION FORM

DIRECTIONS: To be completed by the Scout Master and Senior Patrol Leader. Circle the number that best suits your Units experience at Camp Olmsted. 1 = Poor, 3 = Satisfactory, 5 = Outstanding

FACILITIES:

Camp Site (in general)	1	2	3	4	5
Tents	1	2	3	4	5
Platforms	1	2	3	4	5
Shower Facilities	1	2	3	4	5
Waterfront	1	2	3	4	5
Rifle Range	1	2	3	4	5
Archery Range	1	2	3	4	5
Handi-Craft Area	1	2	3	4	5
Scout Craft Area	1	2	3	4	5
Nature Area	1	2	3	4	5
Health Office	1	2	3	4	5
Dinning Hall	1	2	3	4	5

PROGRAM

Merit Badge Program	1	2	3	4	5
Opening Campfire	1	2	3	4	5
Closing Campfire	1	2	3	4	5
Aquatics	1	2	3	4	5
Handi-Craft	1	2	3	4	5
Shooting Sports	1	2	3	4	5
Nature	1	2	3	4	5
Scout Craft	1	2	3	4	5
First Aid	1	2	3	4	5
Dinning Hall Program	1	2	3	4	5
Morning Colors	1	2	3	4	5
Evening Retreat	1	2	3	4	5
Scout Vespers	1	2	3	4	5
Friday Camp Wide Event	1	2	3	4	5

STAFF

Camp Director (overall)	1	2	3	4	5
Helpful	1	2	3	4	5
Courteous	1	2	3	4	5
Scout Like	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Program Director (overall)	1	2	3	4	5
Helpful	1	2	3	4	5
Courteous	1	2	3	4	5
Scout Like	1	2	3	4	5
Knowledgeable	1	2	3	4	5

STAFF CONT.

Camp Commissioner (overall)	1	2	3	4	5
Helpful	1	2	3	4	5
Courteous	1	2	3	4	5
Scout Like	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Health Officer (overall)	1	2	3	4	5
Helpful	1	2	3	4	5
Courteous	1	2	3	4	5
Scout Like	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Aquatics Staff (overall)	1	2	3	4	5
Helpful	1	2	3	4	5
Courteous	1	2	3	4	5
Scout Like	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Shooting Sports Staff (overall)	1	2	3	4	5
Helpful	1	2	3	4	5
Courteous	1	2	3	4	5
Scout Like	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Nature Staff (overall)	1	2	3	4	5
Helpful	1	2	3	4	5
Courteous	1	2	3	4	5
Scout Like	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Scout Craft Staff (overall)	1	2	3	4	5
Helpful	1	2	3	4	5
Courteous	1	2	3	4	5
Scout Like	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Handi-Craft Staff (overall)	1	2	3	4	5
Helpful	1	2	3	4	5
Courteous	1	2	3	4	5
Scout Like	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Dining Hall Staff (overall)	1	2	3	4	5
Helpful	1	2	3	4	5
Courteous	1	2	3	4	5
Scout Like	1	2	3	4	5
Knowledgeable	1	2	3	4	5
Dining Hall and Food					
Food Quality	1	2	3	4	5
Food Quantity	1	2	3	4	5
Cleanliness	1	2	3	4	5

Please put additional comments on the backside of this sheet.