



**January 17 – 18, 2008
SNOW, SNOW, SNOW
Windblown Ski Area
New Ipswich, NH**

**Time for the first winter camping of the season! Also a wonderful
“warm up” for the Deep Freeze in February.**

Enjoy snowshoeing, or cross country skiing into your camping site. We will have a great campfire to keep us warm and entertained. Come ready with your skits and songs.

Warm weather plan (at alternate site TBA) includes hiking and outdoor cooking skills.

This is MLK weekend, so the Scouts can go and have fun for Saturday and Sunday and then do homework on Monday!!!!

Bring a bag lunch for Saturday and money for a “fast food” stop on the way home Sunday.

Check out the Troop website: www.troop160.com for winter camping information. Ski and snowshoe rentals are available at Windblown Ski Area (cost \$13.00). If you don't have a warm sleeping bag you can rent them from REI.

**Meet at St. Brigid at 7:00AM Saturday. Bring Bag Lunch.
Return to St. Brigid at noon on Sunday.**

Please bring this slip with a check in the amount of \$16.00 payable to **Troop 160** (rental of equipment is extra) and return to Meg Bradley.

Email: Meg Bradley at bonnellbradley@rcn.com if you plan to go so we can arrange Patrols and logistics.

Please respond by Dec. 18 (or as late as Jan. 1st by email. Earlier is better).

APPROVAL FORM

My son, _____ has my permission to participate in the camping trip to Windblown Ski Area (or alternate site TBA) January 17 - 18, 2009

\$ _____ payment is enclosed *(Make checks payable to Troop 160 or \$16.00 cash per scout).*

_____ I can help with supervision and transportation and can take _____ number of passengers.

Food Allergies: No _____ Yes (list) _____

Signed: _____ Date: _____ Phone Number: _____

Email: _____ Emergency Phone: _____

I give permission to the leaders of the above unit to render First Aid, should they need arise. In the event of an emergency, I also give permission to the physician, selected by the adult leader in charge, to hospitalize, secure proper anesthesia, order injection, or secure other medical treatment, as needed.

I further agree to hold the above named unit and its leaders blameless for any accidents that might occur during this outing except for clear acts of negligence and non-adherence to BSA policies and guidelines.

Parent of Guardian _____

Date _____