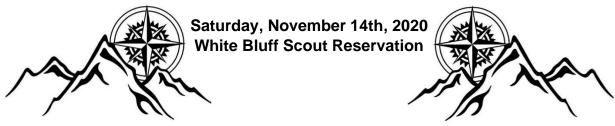
#### 2020 Prairie District

# Cub Scout Adventure Day



Cost is \$10 per person; the whole family is welcome! Registration includes morning adventure activities (for Scouts and Siblings only), Lunch, Fishing Derby registration (Scouts, Siblings, and Parents may fish), and a PATCH!

Join us Saturday, November 14th from 9:00am to 3:00pm for a fun filled day of family Scouting. You and your Scout will rotate through adventure activities like Scout Skills, Games, Crafts, and the whole family can compete in our annual Fishing Derby! There will be awards for the biggest, smallest, and ugliest fish! **BRING YOUR OWN FISHING POLE, TACKLE, AND BAIT!** 

\*\*\*Make sure that the three required documents are filled out prior to coming to the event!\*\*\*

BWC Health Screener and both Child and Adult Waivers

Scouts should be accompanied by an Adult!

Registration Deadline: Monday November 2ND, 2020 BY 5:00pm!

ALL registrations received after 11/2/20, including "At The Door," will incur \$3.00 late fee!!

#### The schedule is as follows:

- 8:00am-9:00am- Parking and Registration
- 9:00am- Welcome and Flag Ceremony- Parade Field
- 9:15am-12:00pm- Cub Adventure Activities- Throughout Main Camp
- 12:00pm-1:00pm- Lunch and Down Time
- 9:15am-3:00pm- Annual Fishing Derby- Weigh in for a chance to win special prizes!

To register, please return this portion of the flyer to:
The Black Warrior Council, Prairie District Adventure Day
P.O. Box 3088
Tuscaloosa Al. 35403

Tuscaiousa, AL 33403	
Name of Scout(s) attending:Names of Parent or Guardian:	
Phone Number: () Email:	
Select the following that apply	<u>.</u>
<ol> <li>Cub Adventure Day &amp; Fishing Derby (lunch included):</li> </ol>	X \$10 per person
2. Fishing Derby Only (no lunch) – Arrive at 1:00pm	X \$5 per person
	Total:

(Please make checks payable to Black Warrior Council, BSA)



## Cub Adventure Day Health and Safety Plan

#### **Before Arrival:**

Paperwork Required upon Arrival:	Items Required for Entry:
☐Youth Waivers	☐ Face Covering
☐ Adult Waivers	
☐ BWC Health Screeners	
$\Box$ Have parents take all family members temperatures to is over 100.4, then we ask that your family stays at home	pefore leaving for camp. If you or a family member temperature e.
At Arrival:	
$\square$ Have completed required forms ready to turn in.	
$\square$ You will then be directed to park.	
Check-In Process:	
☐There will be 4 lines for check-in. Families will be stan	ding 6 feet apart from other families and wearing face covering.
☐The grass will be marked every 6 feet on the parade f	ield.
☐ Families will tell name and then if they pre-registered will pay \$18.00 (Prairie \$13.00) for walk up registratio	l, they will be handed an event packet. If did not pre-register they n and then receive an event packet.
*Event Packet has patch, schedules, map, wrist bands	and fishing lure.
*There will be a separate line for those who have not	pre-registered.
☐ Each paid participant will receive event packets conta	nining fishing lures, patches and schedules.
$\hfill \square$ After receiving the event packet, family will report to opening ceremony.	their assigned number on the parade field and then wait for the
Opening Ceremony:	
$\square$ Families will remain on the parade field during opening	ng ceremony.
$\square$ After the opening ceremony, each group of ten will re	eport to their first activity
$\square$ Groups will then be assigned a program area as their	starting point.
Activities:	
☐ Each group of 10 and will rotate every 25 minutes.	
☐ A bell will sound when it is time to rotate. Please do r	not rotate prior to the bell.

$\Box$ While families wait for their scout during the activity, they must maintain a 6 feet distancing, if they do not stay the recommended 6 feet, they must be wearing a mask within 6 feet of other families.			
$\square$ We will have monitors making sure that these guidelines are followed.			
$\square$ While groups are rotating, the equipment and supplies used, will be wiped down and sanitized for the next group to use.			
<ul><li>a. Equipment to be wiped down and sanitized are bb guns, bows and arrows, slingshots, craft tools like scissors, markers, pens and pencils.</li><li>b. Groups should take crafts that were made with them.</li></ul>			
$\square$ Hand sanitizing stations will be located in each program area.			
Lunch:			
$\square$ Lunches will be boxed and be picked up by each parent who has an arm band at the dining hall patio.			
Fishing Derby:			
$\square$ Families must stay 6 feet apart from other families to reduce the risk of spreading the virus to other families.			
☐ Families must bring their own bait, tackle and fishing rod.			
$\square$ If families are within the 6 feet of one another they must wear a mask.			
☐ There will be fishing in both the lower lake and the upper lake.			
$\square$ Fishing at the boat docks is prohibited.			
Closing Ceremony and Checkout:			
$\square$ Closing ceremony encourage families must remain 6 feet apart and wear masks.			
$\square$ When trophy winners are approaching the presenter, they should be wearing face coverings			
☐ Checking out, families should make way to their vehicles while staying 6 feet apart from other families.			

### **BWC Health Activity Health Screen**

Each youth and adults must complete this screener before they come into contact with other youth or adults.

Name of Youth / Adult:

		Date:	
	Red	corded Temperature:	
Yes	No	(Mark "X" in appropriate box)	
		Temperature > 100.4	
		Have you had a fever within the last 14 day	s?
		Have you had a forceful dry cough or produ	ctive cough within the last 14 days?
	Have you had difficulty breathing or shortness of breath within the last 14 days?		
	Have you had chills or repeated shaking with chill within the last 14 days?		
	Have you had new unexplained muscle pain within the last 14 days?		
	Have you had new or atypical headache for you within the last 14 days?		
		Have you had nausea, vomiting or diarrhea	within the last 14 days?
		Have you had a sore throat within the last :	.4 days?
		Have you had a recent sudden loss of taste	or smell?
		Have you had contact* with a person with	a confirmed case of COVID-19?
		Have you had contact* with a person with	suspected case of COVID-19?
		-	separation for more than 15 minutes without
		adequate personal protective equipm	ent.
	d soci	ially isolate immediately and contact their pr	participate in the activity. The youth or adults mary health care provider to seek further
Name (Printed):		nted):	Date:
Name	(Sign	ned):	Date:
Paren	t/Gua	ardian:	Date:

### **COVID-19** (Youth Waiver)

# ASSUMPTION OF EXPOSURE AND INHERENT RISK, RELEASE OF LIABILITY, WAIVER OF CLAIMS, INDEMNITY AGREEMENT, AND DECLARATION

I, the undersigned **parent or legal guardian** of the child (youth) named below, hereby consent to my and/or my child's participation in an Official Scout Activity ("**Scout Activity**") sponsored by the Black Warrior Council, Boy Scouts of America during the COVID-19 pandemic and agree to the following:

<u>COVID-19</u>. COVID-19 is a mild to severe upper respiratory disease caused by the virus SARS-CoV-2 ("**COVID-19**").

<u>Potential Exposure</u>. I understand that COVID-19 is considered highly contagious and is primarily spread from person to person, including asymptomatic persons. COVID-19 is more likely to be spread when people are within approximately six feet of one another. I understand that while attending a Scout Activity I and/or my child will be within six feet of other people.

<u>Inherent Risks</u>. Exposure to COVID-19 includes certain risks, not all of which can be described herein, but may include coughing, shortness of breath, difficulty breathing, fever, chills, shaking, muscle pain, headache, sore throat, loss of taste or smell, pain or pressure in the chest, confusion, inability to wake, and death.

<u>Assumption of COVID-19 Exposure and Inherent Risks</u>. I have read the previous statements regarding COVID-19 exposure and risks ("**COVID-19 Exposure**") inherent in attending a Scout Activity. I understand and appreciate the COVID-19 Exposure inherent in attending a Scout Activity and that health-related reactions may manifest as a result of attending a Scout Activity. I agree that my attendance and or my child's attendance at a Scout Activity is voluntary and hereby knowingly assume the risk of any and all COVID-19 Exposure.

Waiver, Release, and Indemnification. In consideration of being allowed to participate in a Scout Activity and other good and valuable consideration, the receipt and sufficiency of which I hereby acknowledge, and on behalf of my child and myself, and our respective estates, heirs, and assigns, I knowingly, and with informed consent, do hereby waive, release, agree to defend and indemnify, and shall hold harmless the Boy Scouts of America, the Black Warrior Council Boy Scouts of America, my Troop and Chartering Organization, and all of their respective executives, employees, officers, volunteers, agents, owners, affiliates, officers, directors, partners, managers, members, and agents (collectively, "Released Parties") from and against all demands, claims, losses, injury, damages, liability, attorneys' fees, costs, and/or expenses of litigation, in law or in equity, whether known or unknown, that have arisen or may arise from any COVID-19 Exposure and my participation in the Scout Activity that involve any damage, loss, or injury to me and or my child. I promise not to sue any of the Released Parties for any such demands, claims, or liability. This waiver, release, indemnification agreement, and promise not to sue shall apply to any and all claims of negligence, but does not apply to any claims of criminal conduct, gross negligence, or willful conduct.

<u>Declaration</u>. I declare that neither I nor any individual residing in the same home as me are ill today nor are currently experiencing, nor have experienced within the last two weeks, any symptoms of COVID-19.

This document is revocable, prospectively only, by a writing signed by me that bears the date the revocation is delivered to the above-mentioned Council.

Child's Name (Printed)	Printed Name of Parent or Legal Guardian
Date	Signature of Parent or Legal Guardian
Home Phone Number	 Cell (Mobile) Phone Number

### **COVID-19** (Adult Waiver)

# ASSUMPTION OF EXPOSURE AND INHERENT RISK, RELEASE OF LIABILITY, WAIVER OF CLAIMS, INDEMNITY AGREEMENT, AND DECLARATION

I, the undersigned **parent or legal guardian** of the child (youth) named below, hereby consent to my and/or my child's participation in an Official Scout Activity ("**Scout Activity**") sponsored by the Black Warrior Council, Boy Scouts of America during the COVID-19 pandemic and agree to the following:

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<u>Potential Exposure</u>. I understand that COVID-19 is considered highly contagious and is primarily spread from person to person, including asymptomatic persons. COVID-19 is more likely to be spread when people are within approximately six feet of one another. I understand that while attending a Scout Activity I and/or my child will be within six feet of other people.

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Waiver, Release, and Indemnification. In consideration of being allowed to participate in a Scout Activity and other good and valuable consideration, the receipt and sufficiency of which I hereby acknowledge, and on behalf of my child and myself, and our respective estates, heirs, and assigns, I knowingly, and with informed consent, do hereby waive, release, agree to defend and indemnify, and shall hold harmless the Boy Scouts of America, the Black Warrior Council Boy Scouts of America, my Troop and Chartering Organization, and all of their respective executives, employees, officers, volunteers, agents, owners, affiliates, officers, directors, partners, managers, members, and agents (collectively, "Released Parties") from and against all demands, claims, losses, injury, damages, liability, attorneys' fees, costs, and/or expenses of litigation, in law or in equity, whether known or unknown, that have arisen or may arise from any COVID-19 Exposure and my participation in the Scout Activity that involve any damage, loss, or injury to me and or my child. I promise not to sue any of the Released Parties for any such demands, claims, or liability. This waiver, release, indemnification agreement, and promise not to sue shall apply to any and all claims of negligence, but does not apply to any claims of criminal conduct, gross negligence, or willful conduct.

<u>Declaration</u>. I declare that neither I nor any individual residing in the same home as me are ill today nor are currently experiencing, nor have experienced within the last two weeks, any symptoms of COVID-19.

This document is revocable, prospectively only, by a writing signed by me that bears the date the revocation is delivered to the above-mentioned Council.

Adult's Name (Printed)	Date
Adult's Name (Signature)	Cell (Mobile) Phone Number