



Winter Games

Rolling Hills, Chief Black Dog &
Prairie Lakes Klondike Derby

Phillippo Scout Reservation
February 17th through 19th

www.rollinghills.nsbsa.org

www.chiefblackdog.nsbsa.org

www.prairielakes.nsbsa.org

Let the Games Begin



Unit Registration:

- At the event February 17th 7:30 to 8:45am at the Ramsey Shelter.
- Cost \$20.00 per participant (Boy Scout or Webelos), lunch is included for all.
 - ◇ Adult, Staff and District Personnel \$15.00 each.
- All participants need to bring a BSA Health Form.
- Camping is optional for the whole weekend. Tent camping available.
- The included registration form must be submitted when registering the unit.
- Some adult BSA Leader training will be available at the Le Sueur cabin.

Time Line:

- Registration 7:30 to 8:45am
- Flag Raising 8:45 to 9:00am
- Events 9:00 to 12:00pm
- Lunch 12:00 to 1:00pm
- Events 1:00 to 4:00pm
- Sled Race Throughout the Day
- Awards 4:15 to 4:45pm
- Closing 4:45 to 5:00pm
- Departure 5:00pm

What to Bring with You:

- A Klondike Sled (Olympic Theme)
- Compasses (Note: More than ONE)
- A working GPS unit
- Ropes (Again Note: More than ONE)
- First-Aid Kit (Wilderness First-Aid)
- Blanket
- Warm Clothing and Boots
- Money—There will be a Trading Post

The Details:

- Please watch the boys for signs of hypothermia.
- There will be a sled judging contest. Remember the sled should have an Olympic Winter Games theme.
- There is a shooting event so we **MUST** have a separate signed permission slip for each boy. Must be a parent NO Scoutmaster or Cubmaster!
- Please email us your expected head count so we can plan lunch for everyone. Or if you or the boys have questions please email one of us— Host Troop's Eva Benedetto (majormom@charter.net), Rolling Hills' Scott Pelava (spelava.rhd.nsbsa@gmail.com), Chief Black Dog's Paul Mahowald (pamaho5729@aol.com) or Prairie Lakes' Steve Young (steve276young@gmail.com)

Trading Post

Available items for sale include: Old District Patches and of course Candy, Hot Chocolate, Coffee, Tea and Hot Cider.

Aim for the Awards



Events:

- **Heads Up Volleyball — Did you see that?**
 - ◊ Be prepared for the unexpected.
- **Snowball Defense — Seek Shelter**
 - ◊ INCOMMING !!!!
- **Snow Globe Tug-of-War — Around the World**
 - ◊ It's not what you think.
- **Ski Glove Ball — No dancing here.**
 - ◊ Your score can go backwards.
- **Snow Sculpture Contest — Bring your artistic side**
 - ◊ Let it **SNOW**, Let it **SNOW**, Let it **SNOW**.
- **Geocache Challenge — Can you find it?**
 - ◊ You can earn a bonus toward another event.
- **Snowshoe Biathlon — It is what it is.**
 - ◊ Can you shoot under Stress.
- **Sled Race — This is the mad dash to the end.**
 - ◊ Boots Only, NO Tennis Shoes.
- **Sled Judging — Does it Look Olympic?**
 - ◊ Winter Games Themed Sleds Please.

This is a Legal Document

Permission to Participate in Shooting Sports

This permission form must be completed by the participant's custodial parent or legal guardian prior to any shooting activity, or the youth (Under 18) will not be allowed to participate.

Name: _____ (Print Name of Youth) Date of Birth: _____

I, _____ (Print Name of Custodial Parent/Guardian)

grant my consent to the all the range personnel including Range Officers and Instructors and others serving in these positions to provide my child, with appropriate guns and ammunition and provide instruction as to their use. I further certify that I am a custodial parent with full parental rights or the legal guardian of this child. I understand that this document will be kept and maintained by the Range Officers and Range Instructors. I further understand that only the original document will be accepted and that any modification of this form will result in its' not being accepted by the Range Officers and/or Range Instructors. I also understand that some of these activities will take place at locations not necessarily under the control of these Range Personnel. I further understand that this document will remain in effect for the period listed below.

Inclusive period: Starting February 17, 2017, and ending February 19, 2017

Event Name: Southern Team Klondike Derby

Date _____

Signature of Custodial Parent or Legal Guardian: _____

Instructions

Minnesota Law

609.66 Dangerous weapons.

Subd. 1b. **Felony; furnishing to minors.**

Whoever, in any municipality of this state, furnishes a minor under 18 years of age with a firearm, airgun, ammunition, or explosive without the prior consent of the minor's parent or guardian or of the police department of the municipality is guilty of a felony and may be sentenced to imprisonment for not more than ten years or to payment of a fine of not more than \$20,000, or both. Possession of written evidence of prior consent signed by the minor's parent or guardian is a complete defense to a charge under this subdivision.

Requirements

As you can see by the law listed above the Instructors and Range Officers and Instructors acting on behalf of Northern Star Council Districts will by law need the "**Permission to Participate in Shooting Sports**" (**PPSS**) for every youth who wishes to participate. Listed below are the rules and requirements.

The unit leader is **NOT** authorized to fill out any part of the **PPSS** form, or sign for any youth except their own son or daughter.

The **PPSS** must be filled in complete and correctly by the youth's custodial parent or legal guardian. For divorced parents of a youth, we require a custodial parent's signature for legal reasons. Telephone authorization and/or signature by proxy are not allowed. The range personal require that the **original** signed **PPSS** forms be presented to them at the shooting range.

The **PPSS** will be retained by the Range personnel for their records. Remember the **original** forms are required for the event. The Instructor or Range Officer's decision to allow or NOT allow any, or all, individuals the opportunity to shoot will not be questioned.

Please do **NOT** assume that your unique exception will be allowed. The Instructor or Range Officer will not risk a felony on anything questionable. You should check with the Instructor or Range Officer who will be manning the range beforehand.

District Activities Event Evaluation

Youth Comments

Your Unit # _____

Your Unit's Leaders Name _____

What did you like best about this event?

Which activity did you like best?

Why.

Which activity did you like the least?

Why.

How could we make it better?

Did you feel rushed to finish the stations? **-Yes-** **-No-**
If Yes would you like to see less stations? **-Yes-** **-No-** or more time at each? **-Yes-** **-No-**
If No would you like to see more stations? **-Yes-** **-No-** or more unit free time? **-Yes-** **-No-**

What are your thoughts about the evening campfire program?

Please give us an idea for a future event theme.

What approved scout activity would you like us to have at a future event?

Please rate each of the following with 1 being the lowest and 10 being the highest

Camping Facilities (circle one)	1	2	3	4	5	6	7	8	9	10
Activities (circle one)	1	2	3	4	5	6	7	8	9	10
Theme (circle one)	1	2	3	4	5	6	7	8	9	10
Evening Program (circle one)	1	2	3	4	5	6	7	8	9	10
Worship Service (circle one)	1	2	3	4	5	6	7	8	9	10
Information Packet (circle one)	1	2	3	4	5	6	7	8	9	10
Overall Event Rating (circle one)	1	2	3	4	5	6	7	8	9	10

*** THIS FORM MUST BE COMPLETED AND RETURNED AT CHECK OUT ***

District Activities Event Evaluation

Adult Comments

Your Unit # _____

Number of event patches received _____

Which activity was most beneficial to your youth?

What things do you feel could have been done differently to improve this event?

Were you given enough advance information to be prepared for this event? **-Yes-** **-No-**

What additional information should have been included?

Did you think the facilities were adequate for this particular event?

Do you have any suggestions for non-Council camps we should consider for future events?

Please rate each of the following with 1 being the lowest and 10 being the highest

Camping Facilities (circle one)	1	2	3	4	5	6	7	8	9	10
Activities (circle one)	1	2	3	4	5	6	7	8	9	10
Theme (circle one)	1	2	3	4	5	6	7	8	9	10
Evening Program (circle one)	1	2	3	4	5	6	7	8	9	10
Worship Service (circle one)	1	2	3	4	5	6	7	8	9	10
Information Packet (circle one)	1	2	3	4	5	6	7	8	9	10
Overall Event Rating (circle one)	1	2	3	4	5	6	7	8	9	10

Unit contact person for future events

Name

Phone

Email Address

Unit members, Youth and Adult, interested in serving on the District Activities Committee

Name

Phone

Email Address

Name

Phone

Email Address

Name

Phone

Email Address

*** THIS FORM MUST BE COMPLETED AND RETURNED AT CHECK OUT ***

District Event Boy Scout Roster

Unit's Event Roster

Unit Number _____
 Unit On-Site SPL _____

On-Site Adult Leader _____
 Cell Number _____

S	Patrol Name _____
<input type="checkbox"/>	Patrol Leader _____
<input type="checkbox"/>	Scout 1 _____
<input type="checkbox"/>	2 _____
<input type="checkbox"/>	3 _____
<input type="checkbox"/>	4 _____
<input type="checkbox"/>	5 _____
<input type="checkbox"/>	6 _____
<input type="checkbox"/>	7 _____

S	Patrol Name _____
<input type="checkbox"/>	Patrol Leader _____
<input type="checkbox"/>	Scout 1 _____
<input type="checkbox"/>	2 _____
<input type="checkbox"/>	3 _____
<input type="checkbox"/>	4 _____
<input type="checkbox"/>	5 _____
<input type="checkbox"/>	6 _____
<input type="checkbox"/>	7 _____

S	Patrol Name _____
<input type="checkbox"/>	Patrol Leader _____
<input type="checkbox"/>	Scout 1 _____
<input type="checkbox"/>	2 _____
<input type="checkbox"/>	3 _____
<input type="checkbox"/>	4 _____
<input type="checkbox"/>	5 _____
<input type="checkbox"/>	6 _____
<input type="checkbox"/>	7 _____

S	Patrol Name _____
<input type="checkbox"/>	Patrol Leader _____
<input type="checkbox"/>	Scout 1 _____
<input type="checkbox"/>	2 _____
<input type="checkbox"/>	3 _____
<input type="checkbox"/>	4 _____
<input type="checkbox"/>	5 _____
<input type="checkbox"/>	6 _____
<input type="checkbox"/>	7 _____

S	Attending Adults
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____

Total Adults _____

Total Youth _____

Total Fee _____

Cash _____

Check - # _____

Online _____

Note: For any person serving as staff please check the box under the "S"

Please remember to email us your expected head count so we can plan lunch for everyone.