CAMP USE PERMIT

Camp Horne ☐ Camp O'Rear ☐ White Bluff ☐

1. Submit Camp Use Permit to McAbee Scout Service Center at least 2-weeks prior to use of facilities. Any payments for facilities must be paid at the McAbee Service Center at least 5-days before arriving at camp to insure use of facility.

2. Although the Black Warrior Council will make every attempt to avoid canceling an approved permit, we retain the right to do so.

3. Only a registered unit leader, 21 years of age or older, may submit a Camp Use Permit.

4. It is the responsibility of the registered unit leader to see that all Youth Protection guidelines and the standards as listed in the BSA's Guide to Safe Scouting are adhered to.

5. The Camp Use Permit must be signed by the registered unit leader in charge.

UNIT INFORMATION

Pack #_____ Troop #_____ Crew #_____ Post #_____ LFL #_____ Lodge #_____

Date of Arrival: _____ Approximate Time of Arrival: _____

Date of Departure: _____ Approximate Time of Departure: _____

# of Youth: _____ # of Adults: _____ (minimum of 2)

FACILITIES REQUESTED

Camp Horne

Hulsart Center* ($25) ☐

Dining Hall* ($25) ☐

Trading Post Pavilion ☐

Blackfoot Cabin ☐

Boating Area ☐

Staff Area/Cabins* ($40) ☐

Camp O'Rear

Pavilion ☐

Dining Hall* ($25) ☐

Troop Lodge* ($25) ☐

White Bluff

Pavilion ☐

Campsite _____

Pool* ($2 per person per day paid to the Camp Ranger) ☐

Climbing Tower* ($125) (See Note) ☐

Note: See Climbing Tower Usage Guidelines. Secure Health History/Consent Forms for all participants and turn them into Climbing Director the day of event.

***Facilities with a fee for their use** (The usage fees are for electricity and/or gas expenses incurred during use. All other facilities are accessible at no cost.)

If interested in performing a service project at camp, please see the Camp Ranger. Your service project will help make our camps better for future generations of Scouts.

General procedures to follow once in any camp facilities

1. The leader in charge will check-in upon arrival at the Ranger or Caretaker's home. In the event the activity is cancelled or the arrival time changes, please call and let the Ranger, (205) 393-8293, or Caretaker, (205) 384-5095, know. If you are unable to reach either one, please call the McAbee Service Center at (205) 554-1680.
2. All vehicles will be parked in designated areas. Remember, there are no riders in back of any type of truck and always wear seat belts.
3. Fires will be kept in designated areas and must have constant supervision.
4. Scouts will always use the "Buddy System" while on camp property.
5. Before departing, each group will clean all areas used and check-out with the Ranger or Caretaker.
6. When using aquatic areas, each group will adhere to the Safe Swim Defense Plan and/or The Safety Afloat Plan. This includes having at least one adult trained within the past year in these programs.

Leader _____ Phone _____
E-Mail _____
Address _____ City _____ Zip _____
Youth Protection Training Date _____

Assistant Leader _____ Phone _____
E-Mail _____
Address _____ City _____ Zip _____
Youth Protection Training Date _____

As the leader in charge of this group, I understand my responsibilities as listed in the Guide to Safe Scouting, Youth Protection Policies of the Boy Scouts of America, and the procedures listed on this form. It is also understood, that any willful property damage or damage by negligence is the responsibility of my unit, and all costs to repair or rebuild said property will be our responsibility.

Signed: _____ **Date Submitted:** _____

Printed Name: _____

AQUATIC ACTIVITY

Units involved in aquatic activity must adhere to the *Safe Swim Defense Plan* (swimming) and/or the *Safety Afloat Plan* (boating). This includes having at least one adult trained within the last year in these programs. The leader-in-charge is responsible for seeing that all conditions of these plans are met *(Reference Guide to Safe Scouting).*

Trained Adults 1: _____ 2: _____

Approved by: _____ **Date:** _____
(Council Management)

For Office Use Only

_____ **Placed on camp calendar**
_____ **Request Approved - Signed:** _____ **Date:** _____
_____ **Request not approved - Reason:** _____
_____ **Copy to Unit**
_____ **Copy to Ranger/Caretaker**
_____ **Climbing Director secured for Event** _____ **All fees paid**