

Information Required to File a Tour Permit

Dear Trip Leader:

Please take a moment to provide the following information to the Tour Permit Coordinator, George Pedersen, at your earliest opportunity (*two weeks prior to trip departure is helpful*).

Thank you.

Date of trip departure: _____ Return Date: _____

Roundtrip mileage: _____ No. of Scouts: _____ No. of Adults: _____

Destination: Please provide name of campground, site, &/or trailhead, and describe the purpose of the outing (e.g., merit badge, service project, etc.). Please indicate if any activities will be conducted on or around a body of water or pool (*requires trained adult supervision*), and provide any other pertinent information about the outing. Leaders must have completed YPG training; at least one adult must have completed Hazardous Weather training; and at least one adult should be CPR trained for each trip.

Route description to reach destination (printout of directions from mapquest or other travel source is helpful): _____

Name of trip leader: _____ Age: _____

YPG _____ Hazardous Weather Training _____ Safe Swim Defense _____

Safety Afloat _____ Climb on Safely _____ Water Trek _____ HALT _____

CPR (date completed, agency, & expiration): _____

Name of assistant trip leader: _____ Age: _____

YPG _____ Hazardous Weather Training _____ Safe Swim Defense _____

Safety Afloat _____ Climb on Safely _____ Water Trek _____ HALT _____

CPR (date completed, agency, & expiration): _____

Driver info. & vehicles to be used (list additional drivers/trained adults on back):

Driver's name _____ Vehicle year, make, model, and insurance company & coverage _____

Driver's name _____ Vehicle year, make, model, and insurance company & coverage _____

Additional Trained Adult: _____ Age: _____

YPG _____ Hazardous Weather Training _____ Safe Swim Defense _____

Safety Afloat _____ Climb on Safely _____ Water Trek _____ HALT _____

CPR (date completed, agency, & expiration): _____

Additional Trained Adult: _____ Age: _____

YPG _____ Hazardous Weather Training _____ Safe Swim Defense _____

Safety Afloat _____ Climb on Safely _____ Water Trek _____ HALT _____

CPR (date completed, agency, & expiration): _____

Additional Drivers:

Driver's name Vehicle year, make, model, and insurance company & coverage

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