



## Sea Scout Shooting Weekend

### Work towards the NEW Sea Scout Shooting Award

### August 19-21, 2016

Sea Scouts & Ships can all gather at BSA's Camp Emerson high in the cool mountains of Idyllwild, California for a weekend of shooting, fun and fellowship.

**Amenities:**

- **Bunk in cabins on cots with mattresses**
- **Flush toilets and hot showers**
- **All meals are served in our covered dining hall by Chef Neil & crew**
  - Vegetarians & special diets available with prior notice
  - Sorry, gluten-free is NOT available
- **4 complete meals (Saturday-breakfast, lunch & dinner; Sunday-breakfast)**
- **NO fees for ammunition, targets, hearing & eyesight protection or use of firearms (no privately-owned firearms allowed-BSA policy)**
- **Camp rifles are savage competition-grade .22 Rimfire**
- **NRA Range Safety Officers and Instructors On-Site**
- **Shooting range open all day Saturday and Sunday until Noon**
- **Adults may shoot for the NRA Marksmanship Program awards if time allows**
- **Saturday Night Campfire program**
- **Sunday Morning Inter-faith worship service**

What to bring: Ship Tour Plan, signed copy of the CIEC consent form (attached) for each attendance, and a desire to have fun away from water....I know, *that's* the hard part!

Check-in after 1700 Friday evening  
 Fee: \$42 per attendee

Program runs from 0800 Saturday through 1200 Sunday  
 Cutoff date: All fees must be in the Redlands office by August 8<sup>th</sup>.

Directions to camp on reverse. Questions? Contact Pat Rogers, [patrogers906@aol.com](mailto:patrogers906@aol.com) (909) 867-5361

Detach & Mail to:  
 California Inland Empire Council  
 P.O. Box 8910  
 Redlands, CA 92375-2110

Event ID #: 068

Ship # \_\_\_\_\_ Council \_\_\_\_\_

Contact Person \_\_\_\_\_

Mailing address \_\_\_\_\_

Phone: \_\_\_\_\_

Youth (Male) \_\_\_\_\_ Adult (Male) \_\_\_\_\_

Email: \_\_\_\_\_

Youth (Female) \_\_\_\_\_ Adult (Female) \_\_\_\_\_

Dietary Needs? \_\_\_\_\_

TOTAL X \$42= \_\_\_\_\_



## **Driving Directions**

Utilize the following directions to reach the town of Idyllwild. Once reaching town use the directions at the bottom of the page to locate Camp Emerson.

### From High Desert:

Take the I-15 South to the I-215 South. Continue through Riverside and Moreno Valley. Exit Ramona Expressway-Cajalco Expressway and proceed east. Follow Ramona Expressway to State Highway 74 in San Jacinto. Turn left onto 74 and proceed to State Highway 243. At Junction, use left turn to 243.

### From Low Desert:

At 111 in Palm Desert proceed to the 74 west junction. Follow 74 to Mountain Center. Turn right onto State Highway 243.

### From Murrieta-Temecula:

Take Winchester Rd. north to Highway 74. Turn right and proceed on 74 east and proceed to State Highway 243. At Junction use left turn to 243.

### From Pass Area:

Take 243 South to Idllywild.

### Once in Town:

Once in the Idyllwild area. Take the Isomata or Camp Emerson turn-off on Tollgate Road (There is a sign to Camp Emerson. BSA. Which is seen easier heading North). Continue for approximately one mile and follow the signs to camp.

**PARENT/GUARDIAN CONSENT FORM  
FOR PARTICIPATION IN A COUNCIL-OPERATED CAMP OR ACTIVITY**

I hereby give permission for full participation in a Council-operated camp or activity, subject to limitations noted

\_\_\_\_\_ **Boseker Scout Reservation/Camp Emerson / Camp Wiley**

\_\_\_\_\_ **Day Camp**    \_\_\_\_\_ **Cub Scout Archery Shoot**    \_\_\_\_\_ **Other** \_\_\_\_\_

From (date) \_\_\_\_\_ to (date) \_\_\_\_\_, (year) \_\_\_\_\_

This authorization shall remain effective until replaced or revoked in writing

Full Name of Participant \_\_\_\_\_ Birthdate (month/date/year) \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Medications/Restrictions/Special Considerations (if any): \_\_\_\_\_

Insurance Company \_\_\_\_\_ Policy Number \_\_\_\_\_

Physician's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

**HOLD HARMLESS AGREEMENT**

I understand that participation in the activity involved a certain degree of risk. I have carefully considered the risk involved and have given consent for my child to participate in the activity. I understand that participation in the activity is entirely voluntary and requires participants to abide by applicable rules and standards of conduct. I release the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity for any and all claims or liability arising out of this participation.

**MEDICAL TREATMENT RELEASE**

**(Yes) (No)** In case of emergency involving my child, I understand every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the medical provider selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medications for my child. Medical providers are authorized to disclose to the adult in charge examination findings, test results, and treatment provided for purposes of medical evaluation of the participant, follow-up and communication with the participant's parents or guardian, and/or determination of the participant's ability to continue in the program activities.

**SHOOTING SPORTS RELEASE**

**(Yes) (No)** S. 12552 Furnishing Firearms to Minors under 18 without permission of parent ---  
Every person who furnishes any firearm, air gun, or gas-operated gun, designed to fire a bullet, or metal projectile, to any minor under the age of 18 years, without an express or implied permission of the parent or legal guardian of the minor is guilty of a misdemeanor. By circling yes or no to this item and signing below we are granting/not granting permission.

**TALENT RELEASE**

**(Yes) (No)** I hereby assign and grant to the California Inland Empire Council the right and permission to use and publish the photographs/film/video tapes/electronic representations and/or sound recordings made by the California Inland Empire Council and I hereby release the California Inland Empire Council from any and all liability from such use and publication.

**(Yes) (No)** I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage and/or distribution of said photographs/film/video tapes/electronic representations and/or sound recordings without limitation at the discretion of the California Inland Empire Council and I specifically waive any right to any compensation I may for any of the foregoing.

Restrictions \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION AND SIGNATURES**

Father/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Home/Business Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Mother/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Home/Business Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_