

Central New Jersey Council, BSA
PHILMONT 2011

The Central New Jersey Council, BSA has slots available for 2 crews (24 people) on a first-come, first-serve basis for the 2011 Central New Jersey Philmont Council Contingent! Adults and youth, are welcome and encouraged to sign up now for this high adventure opportunity. A maximum of 10 adults will be permitted to attend the trek. If you have any questions or concerns you may contact the Philmont Staff Advisor, John Gliot at John.Gliot@Scouting.org or (609) 419-1600 x23.

A \$150.00 payment per participant is due with the attached registration form in order to secure your spot. If you receive a slot, this fee is non-refundable unless a replacement for the slot is found.

Trek dates: Tentative itinerary provides for departure from Newark Int'l Airport on approximately July 6, 2011 and a return to Newark Int'l on July 20, 2011 (subject to final availability of flights, lodging, and ground transportation). The actual trek begins the afternoon of July 8, 2011 and ends with breakfast on July 20, 2011.

Payment Information: Your fee includes Philmont expedition fee, airfare from New Jersey to the Philmont area and a return flight. It also includes ground transportation after departing NJ, lodging, meals, activities, sightseeing, a portion of the food for shakedown hikes, t-shirts, shipping and handling of stoves to and from Philmont, CNJC staff support, and the printing of handouts and training materials. Dates for shakedown hikes are to be determined by the Crew Leaders and Organizers.

ANTICIPATED COSTS AND PAYMENT SCHEDULES

With Registration	\$150.00 NON-REFUNDABLE	June 30, 2010	\$400.00
September 30, 2010	\$400.00	December 31, 2010	\$400.00
February 28, 2011	\$350.00	April 30, 2011	\$300.00

Total \$2,000.00 THIS FIGURE COULD CHANGE DUE TO TRAVEL RATES AND CONDITIONS!

- Payments **MUST** arrive at the council office no later than the due dates.
- Payments will be assessed a \$10 per day late fee for everyday late after due date.
- Assessments are based on date received not postmarked.
- If you fall one-month behind on any payment, we reserve the right to replace your slot at Philmont with another Scout from the wait list.
- If the final total amount due is not received by the Council Office by May 15th, the individual forfeits their spot on this trip to a person on the wait list.
- Anyone who is not paid in full will not be permitted to attend the trip.
- Refunds will **NOT** be issued unless a replacement is available.

HEALTH AND SHAKEDOWN INFORMATION AND REQUIREMENTS - SCOUTS MUST BE AT LEAST 14 YEARS OLD (OR BE AT LEAST 13 YEARS OLD AND HAVE COMPLETED THE EIGHTH GRADE PRIOR TO THE START OF THE TRIP) NO EXCEPTIONS TO THIS AGE REQUIREMENT!!

Philmont is an internationally recognized Scout Reservation designed for teaching youth how to conduct themselves at the highest level of physical effort in some of the most difficult conditions. The elevation at the base camp is 6,700 feet above sea level. During the trek each participant may climb peaks nearly 13,000 feet above sea level and experience significant elevation gains. Due to the strenuous nature of a trek at Philmont, several physical requirements must be met or be able to be met well before the shakedowns and the Trek itself. Each youth and adult participant will be required to pass the Philmont Physical Requirements and complete 3 out of 4 Shakedown hikes. In addition to shakedown hikes, there will be a mandatory Equipment Check Meeting where all participants will be required to bring everything they need to attend Philmont. Shakedown hikes will be established and conducted by the crew leaders for the Philmont Trek. If an individual is unable to complete the required hikes or Equipment Check Meeting, they will **not** be able to participate in the Philmont Trek. If an individual is not able to complete any of the physical requirements, the funds that an individual has submitted will not be refunded unless a person on the waiting list is able to take your place.

For Adult Leaders: There will also be required adult leader meeting(s) at a date to be determined.

Philmont Youth Application
Central New Jersey Council, BSA Contingent Council Trip 2011

2245 US Highway 130, Suite 106
Dayton, NJ 08810-2420
(609) 419-1600

PRINT CLEARLY OR TYPE

Scout's Name _____ DATE OF BIRTH _____

Parent or Guardian's Name _____

Same address as the Scout's below? Yes or No If different please write on the back.

Street _____

Town _____ State _____ Zip _____

Scout's E-mail Address _____

Parent's E-mail Address (Required) _____

Home Phone () _____ Cell () _____

Unit _____ District _____ Rank _____

CPR Certified? Yes No Expiration Date _____

First Aid Certified / Responder Yes No Expiration Date _____

Emergency Contact (Someone who is not listed above.)

Name _____ Relationship _____

Home Phone (_____) _____ Cell Phone (_____) _____ Work Phone
(_____) _____

I am in good physical condition and I agree, if selected, to provide the required medical information. I understand that as a youth member I must at all times reflect the ideals of the Scout Oath and Scout Law. I understand that once I commit to attending Philmont, I will need to keep in contact with both the crew leaders and fellow youth that are involved in this trek via phone, e-mail, or fax. I understand that a "Class A" uniform with a CNJC Shoulder Strip must be worn while traveling and at other times that may be designated. I also understand that if I cannot attend Philmont, no refund will be made unless a replacement is found to fill my slot. All statements on this application are true, and I authorize the Central New Jersey Council, BSA to confirm supplied information.

Youth's Signature _____ Date _____

Parent or Guardian's Signature _____ Date _____

Non-refundable Deposit Paid YES NO Date Paid _____

RECEIPT NUMBER FOR CASH _____ or CHECK # _____

Credit Card Number MC/VISA/DISC _____ Exp ___/___

**Philmont Adult Leader Application
Contingent Council Trip 2011
Central New Jersey Council, BSA
2245 US Highway 130, Suite 106
Dayton, NJ 08810-2420
(609) 419-1600**

NOTE: Each adult application must have a current BSA adult registration in good standing. Each application must be reviewed and or accepted by the Scout Executive.

PRINT CLEARLY OR TYPE (All information is required.)

Name _____

Street _____ Town _____ State _____ Zip _____

E-mail _____ Registered in District / Unit # and Position _____

Home Phone () _____ Cell () _____ Business Phone () _____

Have you ever been to Philmont on a Trek before Y N Year(s) _____

Expertise, Qualifications or Special Training _____

Other Leadership Skills _____

(Philmont requires at least one individual in each Crew to be CPR and First Aid Certified. If we do not have enough leaders that are certified, you may be asked to become CPR and First Aid certified.)

CPR certified Yes or No expiration date _____

Wilderness First Aid Certified Yes or No expiration date _____

Other medical training _____

Who do you want us to contact in case of an emergency?

Name _____ Relationship _____

Home Phone (____) _____ Cell Phone (____) _____ Work Phone (____) _____

I am in good physical condition, and I agree, if accepted to provide the required medical information. I understand that as an advisor I must at all times reflect the Scout Oath and Scout Law which is expected of those who represent the organization. I understand that a "Class A" uniform with a CNJC Shoulder Strip must be worn while traveling, meetings and at other times that may be designated. I also understand that I need to keep in contact on a regular basis with the leaders, organizers and youth that are involved in this trek via phone, e-mail, or fax. I also understand that if I cannot attend Philmont, no refund will be made unless a replacement is found to fill my slot. All statements on this application are true, and I authorize the Central New Jersey Council, BSA to confirm supplied information.

Signature _____ Date _____

Non-refundable Deposit Paid YES NO Date Paid _____

RECEIPT NUMBER FOR CASH _____ or CHECK # _____

Credit Card Number MC/VISA/DISC _____ Exp ____/____

If you need more space to write, please feel free to use the back of this form.