

## **Troop 214 Campout / Activity Plan**

Theme: \_\_\_\_\_

Phone

Scout Program Leader: \_\_\_\_\_

Committee Members: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_Adult Advisors: \_\_\_\_\_  
\_\_\_\_\_Dates of Activity: \_\_\_\_\_ Location: **Camping** \_\_\_\_\_ Activity \_\_\_\_\_

Final Commitment Date (to go or not): \_\_\_\_\_

Departure Time and Place: \_\_\_\_\_

Return Time and Place: \_\_\_\_\_

Staff: SPL: \_\_\_\_\_

Chaplain Aide: \_\_\_\_\_

ASPL: \_\_\_\_\_

QM: \_\_\_\_\_

Campfire Leader: \_\_\_\_\_

Adult Leaders:	1 - _____	6 - _____
	2 - _____	7 - _____
	3 - _____	8 - _____
	4 - _____	9 - _____
	5 - _____	10 - _____

Special Equipment:

1 - \_\_\_\_\_

2 - \_\_\_\_\_

3 - \_\_\_\_\_

4 - \_\_\_\_\_

5 - \_\_\_\_\_

**Check List****Person(s) Responsible****Date Needed****Complete ?**

Monthly Program / Presentation Plan:

program committee

Review activities per Guide to Safe Scouting

adult advisor

Plan Aquatic or other Special Activities (if any):

Obtain Reservations / Permission:

Trip Itinerary:

Trip Announcement (Handout):

Itinerary / Plans to SM, SPL, PL's:

Count # of Scouts / Adults:

Transportation Arrangements:

Trip Permit:

Trailer Arrangements:

Obtain Special equipment (if any):

Driving Directions / Map:

Plan Campfire (Campfire Leader):

Plan Church Service (Chaplain Aide):

PLC report dates:    1st report: \_\_\_\_\_ 2nd report: \_\_\_\_\_ Final report: \_\_\_\_\_

3 mos. before trip                      2 mos. before trip                      1 mo. before trip

Program Theme for the Month: \_\_\_\_\_

Scout Skill for the Month: \_\_\_\_\_

Program:	<u>Program Date</u>	<u>Program Activity</u>	<u>Materials Needed</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

Costs:	Food:	Number of meals:	_____	
		Cost:	_____	
		Money to eat out:	_____	
	Camping / Lodging:	Number of nights:	_____	
		Cost per night:	_____	
		Total Cost:	_____	
	Transportation:	Number of miles:	_____	Adult Supervisor: _____
		Gas cost per person:	_____	Drivers (# carried): _____ ( )
		Tolls, etc.:	_____	_____ ( )
		Total cost per person:	_____	_____ ( )
				_____ ( )
				_____ ( )
				_____ ( )
				_____ ( )
				_____ ( )
				_____ ( )
		Misc. Fees:	_____	
		Total cost per person:	_____	

<u>Patrol</u>	<u>Patrol Leader</u>	<u>Acting PL</u>	<u>Number Going</u>	<u>Menu ?</u>	<u>Duty Roster ?</u>
<u>Bison</u>	_____	_____	_____	<div></div>	<div></div>
<u>Frog</u>	_____	_____	_____	<div></div>	<div></div>
<u>Gator</u>	_____	_____	_____	<div></div>	<div></div>
<u>Pedro</u>	_____	_____	_____	<div></div>	<div></div>
<u>Pine Wolf</u>	_____	_____	_____	<div></div>	<div></div>
<u>Raccoon</u>	_____	_____	_____	<div></div>	<div></div>
<u>Old Goat</u>	_____	_____	_____	<div></div>	<div></div>
<u>Total Scouts and Adults going:</u>			_____		