Chicago Area Council Philmont Contingent Youth Application



Please print all informat	ion clearly. Year y	ou wish to participa	ate	
First Name	Last I	Name		
Address	Area code + phone			
City	Zip		Rank	
Email Address		r	Male / Female	
Birth Date	Height	Weight	Grade	
Unit #	District	Posit	tion in Unit	
Other leadership positions	in the past			
Member of the Order of th	e Arrow Yes No	Brotherhood _	Vigil	
Unit Leader's Name		Phone		
I have earned the following merit badges. Mark yes or no by each one. Not having these badges does not stop you from attending. If a Venturer please list Ranger Awards on a separate sheet.				
Hiking Back	Packing	First Aid	Orienteering	
Cooking Camp	ing	Wilderness Sur	vival	
Have you ever been to any	of these locations, if	f so list year.		
Philmont trek National Jamboree Manistee Quest			Quest	
Northern Tier	Sea Base	World J	amboree	
Total Number of camping	nights	Back	packing Nights	
Longest Backpacking trip in days miles				
Extracurricular Activities				
Honors / Awards Received	1			
Attached to this applicatio accepted for the trip your			cent photo. If you are not ur deposit is non refundable.	

Return this form to: Attn: Philmont

Chicago Area Council 1218 W. Adams Chicago Il 60607

CODE OF CONDUCT

All youth and adult participants are selected based on their qualifications in character, camping skills, physical and personal fitness, and leadership qualities. As a Philmont trek participant, I understand this and support the reasonable demands of conduct expected of me.

AS A PHILMONT TREK PARTICIPANT:

- I will observe the rules of my Philmont trek leadership.
- I will live the Scout Oath and Law or Venturer Code and Oath.
- I will observe, respect, and strive to live the Boy Scout Outdoor Code and Philmont Wilderness Pledge.
- I will wear my full official BSA "Class A" uniform or proper clothing, as required. I understand that unofficial decorations are not a part of the official uniform.
- I understand that the purchase, possession, and consumption of alcoholic beverages or illegal drugs are prohibited and will result in my dismissal from the Philmont trek at my expense.
- I understand that gambling of any form is prohibited.
- I understand that possession and detonation of fireworks are prohibited.
- I will demonstrate respect for other participants' personal property and for Philmont property and will be personally responsible for any loss, breakage, or vandalism of property as a result of my actions.
- I understand that deliberate destruction of property is not permitted and will result in dismissal from the Philmont trek at my expense.
- I will at all times be considerate of other participants and staff at Philmont Scout Ranch.
- I understand that serious violations of this code of conduct may result in expulsion from the Philmont trek at my own expense.
- I understand that Philmont offers high adventure backpacking treks and program activities in relatively inaccessible mountainous terrain. Parents, advisors, and youth participants should be alert to the potential for injury. Philmont strives to minimize risks to participants and advisors by emphasizing proper safety precautions. I agree to follow these safety measures and to accept responsibility for my health and safety.

PARTICIPANT

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I have read and promise to abide by the conditions in the Code of Conduct as a participant in the Chicago Area Council Philmont trek. I understand that once accepted monies cannot be refunded unless a replacement is found for your slot in the crew.

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Signature of r articipant	Date
PARENTAL APPROVAL (if participant is under age	18)
physically demanding and involves a high degree of perso	ate in a Philmont trek. We understand that a Philmont trek is nal risk to participants. It is understood that this is a voluntary understand that fees paid are not refundable and that failure to dditional costs to us.
Signature of parent or guardian	Date
Parents Name (Print)	_ Day time Phone
Parent's Email Address	
UNIT LEADER APPROVAL This Scout or Scouter is a member in good standing and I Philmont trek. In addition, I certify that this is an individual	approve his/her participation in the Chicago Area Council al I am pleased to have represent my troop/crew.
Signature of unit leader	Date
Email Address	