

Cradle of Liberty Council Venturing Backpacking Trip

Sunset Rocks Trail (Pine Grove Furnace State Park)



Fri, Mar 15 - Sun, Mar 17

Join COL Venturing for an exciting outdoor adventure weekend hiking part of Pennsylvania's portion of the Appalachian Trail in Cumberland County, PA (nearest village: Gardners, PA). We will spend the night on Friday camping near Pine Grove State Park, and then on Saturday we will hike the Sunset Rocks Trail with all our gear, camping on Saturday night at Tom's Run Shelter, a favorite stop for hikers on the Appalachian Trail. On Sunday, we will hike out together stopping to climb up and enjoy the view from Sunset Rocks! Total hiking distance (both days combined) will be 8.3 miles; part of Sunday's hike will be on a rocky trail.

Leaving: Fri. March 15, 4:45 pm

(Bring a sack dinner to eat in the car or money to buy dinner on the way.)

Meet at the Cradle of Liberty Council Valley Forge Office in Wayne between 4:00 - 4:30 pm

Returning: Sun. March 17, afternoon.

Cost \$30 per person (includes transportation, meals, and campsite fees)

Sign-up by March 4th via the registration page on the Council website at <http://goo.gl/jfZ5x>.

Spaces are limited, so sign up early!

NOTE: THERE WILL BE A **MANDATORY** MEETING FOR ALL PARTICIPANTS ON THIS TRIP ON **TUESDAY, MARCH 5th** FROM **7:00-8:30 PM** AT THE COUNCIL'S VALLEY FORGE OFFICE IN WAYNE (DOWNSTAIRS). WE WILL REVIEW EQUIPMENT AND OTHER CRUCIAL PLANNING DETAILS.

What You Will Need to Bring on this Trip?

- Signed permission slip (attached)
- A current medical form (last 12 months) signed by a parent (for youth under 18 years) and by a doctor is required for this trip. BSA height/weight limits will apply. See http://www.scouting.org/filestore/HealthSafety/pdf/part_c.pdf *This form should be submitted in advance of the trip, no later than March 11th.*
 - Sack dinner for Friday night or extra money to buy something at a rest break.
 - Personal camping equipment. Refer to the **cold**-weather packing list at www.crew176.org (But bring only what you need for 2 days of backpacking; no need for lots of changes of clothes, for example). We'll review equipment at the mandatory meeting on Tuesday, March 5th.
 - Supportive, well-broken in boots/hiking shoes that fit you well.
- You will also need a backpack and at least 2 one-quart water bottles *NOTE: We have backpacks, sleeping bags, and other gear for those who need to borrow. Please contact Mr. C, Council Venturing Advisor, if you have other gear needs/questions: advisor@crew176.org*

This trip is being organized by members of Crew 176. Youth leaders on this trip all have completed Philmont or other extensive backpacking trips. Experienced and trained adult Venturing advisors – both male and female – will accompany the youth on the trail and provide supervision during this trip.

If you have any questions or for further information, please email colventuring@gmail.com or contact the Council Venturing Staff Advisor, Amy Frantz, at 610-688-6900.

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(Pine Grove Furnace State Park)***

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PERMISSION SLIP/LIABILITY WAIVER

I give my permission for my son/daughter _____ to participate in the Cradle of Liberty Council's Venturing Backpacking Trip to the Pine Grove Furnace State Park/Sunset Rocks Trail on Mar. 15-17, 2013.

I understand that such activity involves risks, and I agree to assume those risks and hold Venturing Crew 176 and its sponsoring organizations, the Cradle of Liberty Council, Boy Scouts of America and all of their volunteer leaders harmless from any claims. In the event of an emergency, I understand that every reasonable effort will be made to contact me. In the event that I cannot be reached, I hereby give my permission to the physician or other emergency health professionals selected by the adults or scout leaders coordinating the above-named activity to secure proper treatment, including hospitalization, anesthesia, surgery, or injection of medication for my child. I also authorize the adults in charge of the activity to administer emergency first aid as they deem necessary and agree to waive all claims against and hold harmless any leaders administering or overseeing such emergency aid.

Date _____ Signature of Parent/Guardian _____

Date _____ Signature of Venturer _____

Emergency Contact Phone number(s): _____

Any allergies or other essential medical information: _____