TROOP SERVICE PROJECT MANDATORY!!! SATURDAY, MAY 19, 2012

9AM TO 1PM

(OR AS SOON AFTER 1PM AS WE CAN)

WHAT:

CLEARING INVASIVE PLANTS FROM HOOVER PRAIRIE

WHERE:

DIRECTIONS WILL BE PROVIDED

BRING:

AN OLD LONG SLEEVE SHIRT, AN OLD PAIR OF LONG PANTS, BOOTS, WORK GLOVES, SACK LUNCH, WATER BOTTLE WITH WATER, TRASH

BAG, ANOTHER OLD SHIRT TO CHANGE INTO.

WE WILL BE CLEARING INVASIVE PLANTS FROM HOOVER PRAIRIE, WHICH MAY INCLUDE **POISON IVY** AMONG OTHER THINGS. THE TROOP WILL BE BRINGING SOAP AND WARM WATER, BLEACH-WIPES AND ANYTHING ELSE THAT CAN KEEP US FROM GETTING ANY IVY RASH. YOU WILL WANT TO CHANGE YOUR SHIRT WHEN WE GET DONE, AND DISCARD YOUR OLD SHIRT INTO YOUR TRASH BAG TO TAKE IT HOME TO WASH AS WELL. IF NOT EVEN A PINT OF PREVENTION WILL KEEP YOU FROM DEVELOPING A POISON IVY RASH, LET US KNOW AND WE WILL FIND SOME OTHER WORK FOR YOU TO DO.

TEAR OFF AND TURN IN THE PERMISSION FORM BELOW:

BSA Troop 365 Parental Consent: In consideration of the benefits to be derived, and in view of the fact that the Boy Scouts of America is an educational organization, membership in which is voluntary, and having full confidence that every precaution will be taken to ensure the safety and well-being of my son or myself during this activity or trip, I hereby agree to participate and waive all claims against the leaders of this activity, the officers, agents, and representatives of BSA, as well as the officers and trustees of BSA Troop 365, Inc., except as such claims are covered by liability or other insurance, or other third party benefits. I have provided to Troop 365 a current signed medical form & authorization on file with the Troop. I know about and agree to follow Troop 365 Committee policies on discipline and knife use. I understand that absolutely **NO** tobacco use, drug use, or alcohol use is permitted at Troop activities and outings.

Scout Name:	Attending adult name:
Activity Restrictions (if no	ne, so state):
Present Medications (if n	one, so state):
Allergies (if none, so state Note: Each person joining a tr	e):oop activity must have a signed Medical form on file with the troop
Telephone Numbers whe	ere parent may be reached during the activity:
Parent Signature:	

DIRECTIONS TO HOOVER (RESERVOIR) PRAIRIE RESTORATION PROJECT

TAKE STATE ROUTE 161 (DUBLIN-GRANVILLE ROAD) EAST TO SUNBURY ROAD

TURN LEFT ONTO SUNBURY ROAD (NORTH)

TURN **RIGHT** ONTO CENTRAL COLLEGE ROAD (EAST)

TURN LEFT ONTO CUBBAGE ROAD (NORTH)

TURN **LEFT** ONTO THE FIRST ROAD ON THE LEFT (NO NAME—MAY BE THE PARK ENTRANCE)-- FOLLOW THIS ROAD A SHORT DISTANCE TO THE PARKING LOT ON THE RIGHT HAND SIDE.

WE WILL **MEET AT THAT PARKING LOT** AND WALK TO THE WORK SITE.