

GLACIER'S END DISTRICT MERIT BADGE CLINIC

Saturday, March 26, 2011

Our Saviors Lutheran Church, 1300 Mansfield St., Chippewa Falls

PRE-REGISTRATION through your Troop Scoutmaster is **REQUIRED**.

Classes will be filled on a first-come, first-serve basis.

Your Scoutmaster will be provided with an update once pre-registration is completed.

Merit Badge Registration: 7:30 AM – 8:30 AM

Opening Ceremony: 8:45 AM

Morning Session: 9:00 AM to 12:00 PM

Lunch: 12:00 PM to 12:30 PM

Afternoon Session: 12:30 PM to 3:30 PM

Cost: \$4 per Scout per day (if paid in advance)

- Provide your own sack lunch or purchase a hot Lunch Spaghetti plate including beverage & desert for \$3.00. (Scouts are not allowed to leave location for lunch.) Pop & Snacks sold for lunch & breaks
- Dress is Official Scout Uniform. (Class A)
- Bring a pencil, notebook, Scout Book and Merit Badge book(s). MB books are available for sale at the Clinic.



Boy Scout Leader Specific Training – All Day
 Cub Scout Leader Specific Training – All Day
 \$15.00 fee for Leader Training (includes book)

Life to Eagle Training PM ONLY (Scouts, leaders and parents are welcome)

Automotive Maintenance
 PM ONLY
 14 years & older Limit 10



Home Repairs
 All Day Session
 Limit 10



Citizenship in the Community
 2 – All Day Sessions
 Limit 10 each session



Orienteering
 All Day Session
 Limit 10



Citizenship in the Nation
 2 – All Day Sessions
 Limit 10 each session



Personal Management
 AM/PM Sessions
 Limit 10 each session



Citizenship in the World
 2 – All Day Sessions
 Limit 10 each session



Plumbing
 AM/PM Sessions
 Limit 10 each session



Computers
 AM/PM Sessions
 Limit 10 each session



Public Speaking
 AM/PM Sessions
 Limit 10 each session



Cooking
 All Day Session
 Limit 10 (\$3 add'l Fee)



Traffic Safety
 AM ONLY
 Limit 10



Fire Safety
 All Day Session
 Limit 10 Offsite permission slip needed



First Aid
 AM ONLY
 Limit 10



Suggested Merit Badge Prerequisites

Find list of requirements at www.meritbadge.org
 (Try to look over all requirements in advance.)

- Cit in the Community: # 2, 3, 7
- Cit in the Nation # 2, 3, 6
- Cit in the World # 3 and 2 of # 7
- Computers: # 6, 7, 10
- Cooking: Menus for # 3, 5, 7, 8 (Additional \$3.00 fee for food – pay at clinic)
- First Aid: #2B (Bring a home first aid kit)
- Personal Management: #1, 5, 9 & 10
- Public Speaking: # 5
- Traffic Safety # 5

If you wish to purchase a merit badge book at the clinic bring \$5.00 with you!

**Glacier's End District Merit Badge Clinic Registration
Saturday, March 26, 2011**

Troop: _____

Contact Person: _____ **Phone:** _____

Address: _____

Email: _____

Troop Roster: (Make as many copies as needed)

Scout: _____	Age: _____	Rank: _____
AM 1 st Choice: _____	AM 2 nd Choice: _____	
PM 1 st Choice: _____	PM 2 nd Choice: _____	
All Day 1 st Choice: _____	All Day 2 nd Choice: _____	

Scout: _____	Age: _____	Rank: _____
AM 1 st Choice: _____	AM 2 nd Choice: _____	
PM 1 st Choice: _____	PM 2 nd Choice: _____	
All Day 1 st Choice: _____	All Day 2 nd Choice: _____	

Scout: _____	Age: _____	Rank: _____
AM 1 st Choice: _____	AM 2 nd Choice: _____	
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Scout: _____	Age: _____	Rank: _____
AM 1 st Choice: _____	AM 2 nd Choice: _____	
PM 1 st Choice: _____	PM 2 nd Choice: _____	
All Day 1 st Choice: _____	All Day 2 nd Choice: _____	

Email, Call or Send Troop Roster to:

Chippewa Valley Council
710 S. Hastings Way
Eau Claire, WI 54701
Phone: 715-832-6671
Fax: 715-832-6711
Email: (preferred) terjay@bsamail.org

Submit your roster before March 23.

Classes will be filled on a first-come, first-serve basis. MB Clinic fee is \$4 per Scout. Checks can be made out to Chippewa Valley Council, BSA. Contact person will be notified via email or phone as soon as possible after registration is completed.

MERIT BADGE OFF SITE TRAVEL PERMISSION SLIP OR PARENTAL INFORMED CONSENT AGREEMENT

Scoutmasters please make copies of this form and distribute to the scouts in your unit taking the noted Merit Badges.
Scouts taking the noted Merit Badges must have this form filled out and signed by parents / guardians in-order to participate in the Merit Badge.
Scouts must turn-in this form in when you arrive for the clinic during check-in / registration at Chippewa Falls on 3/27 before 9 am.

I understand that participation in the Glaciers End Merit Badge Clinic *Off Site locations being offered through the Glaciers End District, Chippewa Valley Council, Boy Scouts of America on March 26, 2011 involves a certain degree of risk that could result in injury or death.

*Off Site is defined as outside the Our Saviors Lutheran property grounds between 9am and 4pm on 3/26/11.

In consideration of the benefits to be derived and after carefully considering the risk involved, and in view of the fact that the Boy Scouts of America is an organization in which membership is voluntary, and having full confidence that precautions will be taken to ensure the safety and well-being of my son, I have given;

Print Scouts Full Name Troop #

My consent to participate in the following Activities(s) Merit Badge(s);

Please circle only those that apply

Fire Safety

In case of emergency, I understand every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the physician selected by the adult leader / merit badge counselor in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medications for my child. This form must have both parent/guardian signatures. (if applicable)

Parent #1 Printed Full Name

Parent #1 Signature

Date

Parent #2 Printed Full Name

Parent #2 Signature

Date

Phone numbers in case of emergency;

Home _____

Business _____ (If applicable day of clinic)

Cell Phone _____

Other _____

Scoutmaster _____ Phone Number _____ Troop # _____