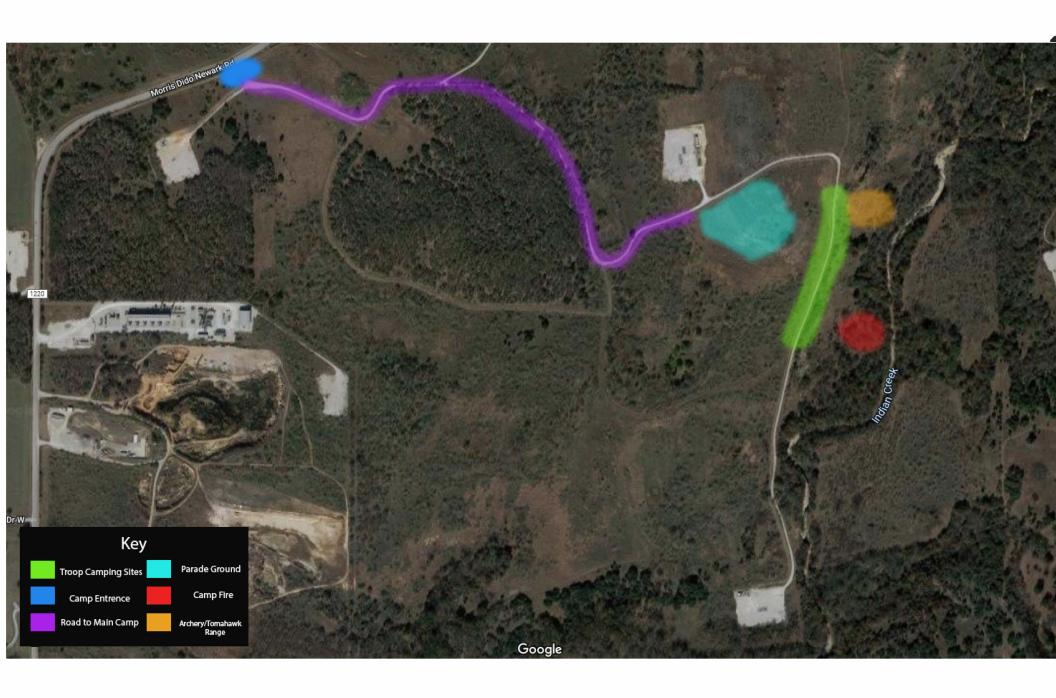
## 2022 Camporee

Camp Map



## Schedule

## Friday

Check In SPL Meeting Lights Out

6:00 PM	~9:00:00 PM
9:30 PM	10:00 PM
10:45 PM	~

## Saturday

Opening Flags
1 Event
2 Event
3 Event
Lunch
4 Event
5 Event
6 Event
7 Event
Dinner
Closing Flags
CampFire
OA Callout
Lights Out

8:30 AM	8:55 AM
9:00 AM	9:45 AM
9:50 AM	10:35 AM
10:40 AM	11:25 AM
11:35 AM	1:00 PM
1:05 PM	1:50 PM
1:55 PM	2:40 PM
2:45 PM	3:30 PM
3:35 PM	4:20 PM
4:20 PM	6:50 PM
6:55 AM	7:10 PM
7:15 PM	8:00 PM
8:00 PM	9:30 PM
10:45 PM	~

# Saturday

Chapel Checkout 9:00 AM 10:00 AM 9:00 AM 12:00 AM

### **Events**

The troop will be rotating through a series of stations throughout the day where they will be able to participate in fun activities and work toward the Indian Lore Merit Badge. The Troops will get their schedule for the order of events that will be participating in at the SPL meeting Friday night. They will be at each station for 45 minutes then they will rotate to the next station.

- Event 1 Archery
- Event 2 Tomahawk Throwing
- Event 3 Leatherworking (Requirement 3b Part 1)
- Event 4 Basket Weaving (Requirement 3b Part 2)
- Event 5 Beadwork (Requirement 3b Part 3)
- Event 6 Indian Lore Merit Badge 1 (Requirement 1, Requirement 5f)
- Event 7 Indian Lore Merit Badge 2 (3 Games) (Requirement 4a)

### **Troops**

#### Check-In

Check-in will begin at 6:00 pm, when you arrive you should have the following information ready: "BSA COVID-19 Camp-Event "At-Risk" Participant Statement", "Pre-Event Medical Screening Checklist 2020", "Texas Military Forces & Adjutant General's Department WAIVER OF LIABILITY" completed and signed for each person. Each vehicle arriving will need an "Arrival Screening Checklist" and each Troop will need to provide a complete roster of every individual that their Troop is bringing to the Camporee with contact information for each person if available. The above forms are attached at the end of this document.

#### **Adult Volunteers**

Each unit attending is asked to have an adult volunteer / adult volunteers that are willing to run one of the stations that the troop will be rotating through throughout the day. All material and instructions will be provided by us.

#### Water

Troops should plan to bring with them the water that they will need for the weekend as we will only have one water buffalo available.

#### A Scout is Clean

During the Camporee, we should be following the principle of clean Leave No Trace and leaving the camp better than we found it. Please pick up all trash that you find and dispose of your trash properly so we are able to use this camp in the feature. Your Troops should also plan on taking all trash out with you since there is no location to dispose of trash at the camp.

#### Cracker Barrel for SPL/Scout Masters

There will be a scoutmaster and senior patrol leader meeting at 9:30 pm on Friday Night. This is a very important meeting where we will be providing important information about the activities the next day, any updates, and providing you with the order of activities your patrols will be rotating through the stations.

#### **Medical Forms**

Each troop should have health information and appropriate BSA Medical forms available for every participant at their camp in a location known to the Adult Leaders in case of an emergency.

#### First Aid Station

There will be a First Aid Station located at HQ on the parade grounds. However, troops should be able to provide their own Troop level first aid in their campsites. Troops should have first aid kit readily available in their campsite.

#### Camp Fire

We will be holding a campfire Saturday night. Each troop should be prepared for a skit or songs during the campfire. We will have a signup sheet Friday night at the SPL meeting for Troop to sign-up for their skits and songs. Immediately following the Camp Fire conclusion the campfire will be turned over to the Order of The Arrow, For the OA Ceremonies.

#### Camp Site Inspections

Saturday each campsite will be inspected for how clean their camp is, if the tents are set up properly and if duty roster/meal plans for each patrol are posted.

#### Religious Service

Sunday morning we will be having a religious service at the campfire location if you wish to attend. If you choose not to attend we ask you the remain quiet in your camp until the service is completed.

#### Latrines

There will be portable toilets available in the camp.

#### **OA Brotherhood Opportunity**

The Order of the Arrow will be having an Brotherhood opportunity for any member of the Order of Arrow who meets the requirements for Brotherhood of at least 6 months of service to the OA. We will need the names of these people who plan on doing their Brotherhood opportunity at Camporee in advance but no later than the SPL meeting Friday night. If you plan on doing your Brotherhood opportunity at Camporee you should plan on being with the OA most of Saturday.

# Texas Military Forces & Adjutant General's Department WAIVER OF LIABILITY

I,	certify that I am the user andeighteen (18) years old or
older, seventeen (17) years old or years	ounger with parental consent, and have the authority and mental
in activities on property owned or managed by	n this waiver. My signature below affirms my intent to participate
in activities on property owned or managed of	the Texas Williary Forces.
FORCES AND/OR THEIR AGENTS OR A OTHERS (AND ANY RESULTING OF REASONABLE EXPENSE, INCLUDING A OTHER COSTS) OCCURRING AS A RIFACILITY AND OR FORT WOLTERS TREMILITARY FORCES. THE INDEMNITY OF THE USER'S INSURANCE, (b) INSURANCE OMPENSATION ACT OR SIMILAR EMAN INJURY IS CAUSED IN WHOLE OR	END, AND HOLD THE STATE OF TEXAS, TEXAS MILITARY SSIGNS HARMLESS FROM ANY INJURY TO MYSELF OR RELATED CLAIM, ACTION, LOSS, LIABILITY, OR ATTORNEY'S FEES AND OTHER FEES AND COURT AND ESULT OF THE USE OF EAGLE MOUNTAIN TRAINING AINING CENTER OWNED OR MANAGED BY THE TEXAS CONTAINED IN THIS PARAGRAPH (a) IS INDEPENDENT RANCE OF THIRD PARTIES, (c) WILL NOT BE LIMITED ATUTES OR DAMAGES PAID UNDER THE WORKERS' IPLOYEE BENEFIT ACTS, AND (d) WILL APPLY EVEN IF IN PART BY THE ORDINARY NEGLIGENCE OR STRICT
	S, TEXAS MILITARY FORCES AND/OR ITS AGENTS OR
NEGLIGENCE OR WILLFUL MISCOND	THE EXTENT AN INJURY IS CAUSED BY THE GROSS
MEGEIGENCE ON WILLIFUL MISCOND	oct of same.
USER'S FULL NAME:	
USER'S PHONE NUMBER:	
USER'S ADDRESS:	
	_ (If 17 yrs old or younger, must have parental signature below.)
USER SIGNATURE:	DATE:
USER PARENT FULL NAME:	
USER PARENT SIGNATURE:	

### **Arrival Screening Checklist**

Longhorn Council Contact Tracing Form - Have one form in each vehicle, filled out and ready.

Camp or Facility:	Date		
	Circle: Pack, Troop, Crew		
Leader in Charge:	Unit #:	_ District:	_ Driver or Person Filling Out Form:

Use this form to screen each youth and adult Scout or visitor ON ARRIVAL for each of the symptoms, listed in order, to enter a Longhorn Council camp or facility.

- PART 1. Temperature Check: 100.4 + is automatic "Go Home." Temperature of 99.2 or higher, but less than 100.4, the person will be asked to begin self-monitoring their temperature twice a day for a minimum of 7 days to determine if the temperature is going up or down, and stay in touch with their unit leader.
- PART 2. Do you have any of these symptoms.

If a person answers Yes to any question, they will be politely asked to leave immediately with their group and to begin the standard 14-day quarantine and consult with their physician. Their unit leader & family will be notified.

• PART 2	Reserve	d: Camp St	aff Only	Circl	e an Ansv	ver	for e	ach	Trav	el Qı	estic	on a	nd S	ymp	tom	ı ( Y =	yes,	, N = 1	no).																																																																				
Print Names (Indicate Youth or Adult)	Temp check under 100.4.	Turned in Pre-Event Health Screening Form.	Turned in At Risk Form.	are in close been in c anyone di covid-19	ave you or anyone you re in close contact with been in contact with nyone diagnosed with		Have you or anyone you are in close contact with been in contact with anyone diagnosed with covid-19 in the last 15		lave you or anyone you re in close contact with been in contact with anyone diagnosed with covid-19 in the last 15		Dry Cough		Dry		Dry		Sore Shortness				Shortness of Breath		Shortness of Breath		<i>New</i> Head- ache		Head-		<i>New</i> Head-		Head-		er or ills	Naus Vomi or Diarr	ting	Nev Loss Taste Sme	of or	or R	estion unny ose	Fat Mus	lew tigue, scle or Aches																																														
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Please fill out this form for each person in EACH vehicle travelling to camp. Temperature screening and turn-in of all required forms will take place on arrival at the camp entrance. Please turn in at the screening station at the Front Gate completed copy of the **BSA COVID-19 Camp-Event "At-Risk" Participant Statement**for each person and this completed **Pre-Event Health Screening Form** for each vehicle.

Revised 9-10-20

## BSA COVID-19 Camp-Event "At-Risk" Participant Statement Must Be Signed and Brought to Check-In

Name: _		Unit Type	Unit Number
Campin	g at		
oriority establis out the	/. In light of COVID-19, we are t shed health and safety measur	taking additional precautions are for communicable diseases	oloyees is the Longhorn Council's top at camps on top of our long- s. These precautions are important, any other illness while at camp or
COVID- may be equire activition	-19 may show no signs or sympe contagious before their symped health screenings and be allow	otoms of illness but can still spotoms occur it is possible that a owed into a camp. We also knowld in many situations and imp	CDC) shows that some people with read the virus. Since some people an infected person may pass all the now the very nature of camps and possible in others. We are modifying 9 pandemic.
coordin	ur council physician, health an nating with state and local hea uidance to mitigate the risk of	Ith departments and the CDC	to ensure we are aware of and follow
	to turn in on arrival.  Health screening upon arrival commissioners which will incommissioners which will incompose which will as well as standard screening on the Note: should anyone be allowed to enter of the Only people registered via our Hygiene and social distancing Requirement for participants All visitors will be screened up Hygiene and social distancing Extra handwashing /sanitizing Dedicated staff to clean and of An emergency response plan should a person at a camp defined.	I at camp check-in time conducted a temperature check, hys questions regarding symptone in the unit not pass the arrivation. It is online registration system was reminders throughout the case & staff to wear masks while it pon arrival before entry to care greminders throughout the was gestations at activity class area disinfect high-touch surfaces at that includes an isolation, quality week and two weeks after the	giene and social distancing reminders, as, travel history, and exposure. al screening, the entire unit will not will be allowed on camps. mp experience. In class, near others, or in buildings. mp. eekend.
medica ensure We kno conside	al conditions are at higher risk to a second tions are at higher risk to a second from the sec	for severe illness from COVID- <i>m your health care provider pi</i> llunteer, and Scouting family h	y age who have serious underlying 19. If you are in this group, please rior to attending camp. as a unique set of circumstances to aformation will be helpful as you
Signatu	ure	Date	
Signatı	 ure of parent / guardian	 Date	

Longhorn Council Boy Scouts of America

### **Pre-Event Medical Screening Checklist 2020**

Please review this form with your scouts and parents prior to the day your unit departs. The day of your departure complete this form with all scouts and parents present. It is imperative that this form be completed the day of your departure. If a scouts or adult arrives at camp with the symptoms listed on the Questionnaire they will be sent home immediately.

Prior to attending camp, we request that each unit leader review/ask the following questions with all of your unit adults and youth. We request that you do this prior to departing your home location.

Assessing the Health Status of Your Unit/Campers: ask the following questions to every person in your unit:

1. Has the participant had any of the following symptoms in the last 24 hours?

<ul> <li>Fever. Feeling feverish or a measured temperature greater than or equal Fahrenheit</li> <li>Vomiting</li> <li>Diarrhea</li> </ul>	al to 100.0 degrees
If the participant has fever, vomiting, OR diarrhea—he or she should stay home.	
2. Has the participant had any of the following new or worsening signs or symp 19 or other communicable disease in the last 24 hours?	otoms of possible COVID
<ul> <li>Cough</li> <li>Unexplained extreme fatigue or muscle aches</li> <li>Chills</li> <li>Repeated shaking with chills</li> <li>Muscle pain</li> <li>Sore throat</li> <li>Loss of taste or smell</li> <li>Known close contact with a person who is lab confirmed to have COVID</li> <li>Have you travelled internationally or to any location within the last 14 d domestically that is a confirmed COVID-19 hotspot?</li> </ul>	
If the participant has any of these symptoms—he or she should stay home.	
Participants who become ill should not return to the activity until they are clear provider.	ed by a health-care
Please assure the health and safety of all of our campers by assuring that only So are healthy come to our camps and events.	couts and leaders who
Unit Type Unit #	
Participant Name	
Parent/Guardian or Adult Signature	 Date

For each participant, please turn this form in to your unit leader or event check-in staff on the day of arrival at the event along with the BSA COVID-19 Camp-Event "At-Risk" Participant Statement.