

### BSA High Adventure Base Expedition Adult Leader Application

I hereby make application to the Suffolk County Council for an adult leader opening in the council's \_\_\_\_\_ Expedition to:  
(Year)

- Philmont Scout Ranch
- Florida Sea Base
- Northern Tier High Adventure Base
- The Summit Bechtel's H.A. Base

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

E-Mail: \_\_\_\_\_ Height: \_\_\_\_\_ ft \_\_\_\_\_ in, Weight: \_\_\_\_\_ lbs.  
(There are maximum height/weight restrictions)

**Current Scouting Position:**

Troop/Crew # \_\_\_\_\_ District: \_\_\_\_\_

Registered Position: \_\_\_\_\_

Previous Scouting adult leader positions: (list all, with dates): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Previous high adventure experience:** (circle all that apply and provide details)

Philmont      Adirondacks      Catskills      Harriman      Canoeing      The Summit Bechtel

\_\_\_\_\_  
\_\_\_\_\_

Other long-term camping experiences you have had, with dates: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Training:** (list all current BSA courses completed, with dates): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Are you certified in Red Cross Basic First Aid? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you certified in CPR? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you certified in Wilderness First Aid? Yes \_\_\_\_\_ No \_\_\_\_\_

Other volunteer activities: (Little League, Red Cross, service club, etc): \_\_\_\_\_

\_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Briefly describe your job responsibilities: \_\_\_\_\_

\_\_\_\_\_

I enclose the reservation fee of \$100.00 required with this application. I agree to adhere to the Code of Conduct, to meet my full responsibilities as a member of the contingent, take such preliminary training as required, and to wear the official uniform, as directed by the contingent leader.

I further agree to submit evidence of fitness to make this trip on the official health form signed by a licensed physician; also that I will obtain immunizations if required.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return with a \$100.00 deposit, to:  
Suffolk County Council, BSA  
7 Scouting Blvd, Medford, NY 11763  
ATT: High Adventure Treks**

REFUND POLICY

The Suffolk County Council will make every effort to fill all openings in each High Adventure Base expedition and to establish a waiting list for each trip.

If a confirmed participant cancels their reservations all payments received to that date, less the initial application deposit, would be refunded if the vacancy can be filled.

If the vacancy cannot be filled only payments received, less the initial deposit and any non-refundable expenses already paid by the council to that point can be refunded.

All refund applications must be made in writing.