



Floodwood Mountain Scout Reservation

Adirondak High Adventure since 1965

director@floodwood.org

www.floodwood.org



Itinerary Form

(one form per trek)

Directions: The purpose of this form is to help you plan your trip: where you will depart from, where you will stay each night, and where you will finish your trek. **This form MUST be submitted in its entirety before you arrive at camp to allow time to obtain the necessary permits for your trip.** As always, trek itineraries can be fine-tuned at camp, but for the sake of securing permits for you should have as accurate an itinerary as possible.

(Circle One) Troop Crew # _____ Town: _____ District: _____

Trek Will Include: # _____ Scouts and # _____ Leaders Council: _____

Contact Person Info (Preferably the same name as on the reservation) Name: _____

Phone (day): _____ Phone (evening): _____

Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Circle Your Week	Week 1	Week 2	Week 3	Week 4	Week 5
	July 10-16	July 17-23	July 24-30	July 31-Aug 6	Aug 7-13

Please list the campsite/location you will be camping at each night

SUNDAY (leave blank unless you will leave Sun)	MONDAY (Day 1)	TUESDAY (Day 2)	WEDNESDAY (Day 3)	THURSDAY (Day 4)	FRIDAY (Day 5)

Starting Location (circle one): Rollins Pond OR Other: _____

Ending Location (circle one): Rollins Pond OR Other: _____

Merit Badge interest? YES OR NO If YES, please list: _____

We request the usage of _____ Kevlar canoes for our trek (additional \$10/day/canoe). Note: We have a limited number of these light-weight canoes and cannot guarantee availability. They are to be used by crews traveling in the St. Regis Canoe Area only.

Is this the first time at Floodwood for: YOU? YOUR TROOP?

Special Requests:



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Food Allergies, Dietary Restrictions, and Religious Restrictions Form

To help in planning your crew's food menu while out on trek, the Floodwood Commissary would like to be aware of any food allergies, dietary restrictions, or religious restrictions amongst your crew participants. Information is strictly being used to inform Floodwood Commissary personnel of any changes that need to be made for individuals or for an entire group. Please fill out the boxes below with food allergies, dietary restrictions, or religious restrictions information (be specific). Please DO NOT WRITE NAMES.

Troop/Crew # _____

Week attending Floodwood (circle one)

1 2 3 4 5

List Any Food Allergies, Severity & Number of Crew Members
List Any Dietary Restrictions & Number of Crew Members
List Any Religious Restrictions & Number of Crew Members

Please return completed applications to:
Scott McKim, Floodwood Camp Director
40 Split Rock Rd
Saranac Lake, NY 12983
Phone: 907.330.9730
director@floodwood.org



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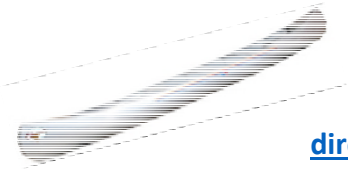
www.floodwood.org



Group Gear Request Form

(check boxes)

1. Cook kit (pots & pans)
2. Utensil kit (CCS utensil rollup & MSR Alpinist kit)
3. Stoves:
 - Canister stove (Jet Boil Genesis stove)
 - Bulk fuel stove (MSR Whisperlite & DragonFly)
4. Fuel:
 - Canister fuel
 - White gas
5. Tarp (CCS Tundra Tarp, 10' by 14', 1.1 oz)
6. Portage pack (Granite Gear Quetico)
7. Map
8. Bulk water jug (MSR Dromedary)
9. Water filter (Sawyer 4L gravity system)
10. Chemical water treatment (Aquamira)
11. Food pack (CCS kitchen bag)
12. Food barrel (Granite Gear 30 L barrel w/harness)



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Trek Roster

(Use separate rosters for each trek attending)

Trek Requirements:

- Must have at least two leaders – one of which can be the Voyageur. One leader must be over 21; the other leader must be over 18.
- Canoeing crews have a maximum size of 12 people – this includes the Voyageur. Hiking crews, in the High Peaks Region, have a maximum crew size of 8 people – this includes the Voyageur.
- Follow Youth Protection Guidelines (i.e., co-ed leadership for co-ed crews).

LEADERS

Name (Please write legibly)	Address (Required)	Telephone # (Required)	Date of Birth (Required)	DL # & State (Required)
1.				
2.				
3.				
4.				

SCOUTS

Name (Please write legibly)	Date of Birth (Required)	Name (Please write legibly)	Date of Birth (Required)
1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	

VOYAGEUR NAME: _____

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