



Troop 53 Outdoor Activity Checklist

Note: Planning should start three months prior to the activity.

Activity: _____

Activity Organizer: _____ Date: _____

Activity Dates: _____ to _____ Added to Troop Calendar: Yes N/A

Activity Location: _____

Reservation Completed: Yes N/A

Location Permit Completed: Yes N/A

Permission Slips Completed: Yes N/A

Medical Forms up to Date: Yes N/A

Activity Schedule Completed: Yes N/A

Tour Plan Completed: Yes N/A *Note: Needs to be completed two weeks prior to activity*

Location Details and Arrangements

Drinking Water: Yes No

Fire Pit: Yes No

Trees for Hammock: Yes No

Open area for Tents: Yes No

Hard Cover: Yes No

Bathroom Facilities: Yes No

 Yes No

 Yes No

 Yes No

 Yes No

 Yes No

 Yes No

Attendance

Signup Sheet Available: Yes N/A

Total Scouts: _____

Vehicles / Drivers Needed: _____

Total Leaders: _____

Adequate Transportation: Yes N/A

Grand Total: _____

Activity Fees

	Total	Per Attendee
Location:	\$ _____	\$ _____
Transportation:	\$ _____	\$ _____
Misc:	\$ _____	\$ _____

Collected		Paid	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Notes:

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Patrol Meal Planners

Patrol

Meal Planner Complete: Yes N/A

Approved Meal Plan: Yes N/A

Patrol Box Equipped: Yes N/A

Meal Money Collected: Yes N/A

Food Purchaser _____ Date to Purchase: _____

Patrol

Meal Planner Complete: Yes N/A

Approved Meal Plan: Yes N/A

Patrol Box Equipped: Yes N/A

Meal Money Collected: Yes N/A

Food Purchaser _____ Date to Purchase: _____

Patrol

Meal Planner Complete: Yes N/A

Approved Meal Plan: Yes N/A

Patrol Box Equipped: Yes N/A

Meal Money Collected: Yes N/A

Food Purchaser _____ Date to Purchase: _____

Patrol

Meal Planner Complete: Yes N/A

Approved Meal Plan: Yes N/A

Patrol Box Equipped: Yes N/A

Meal Money Collected: Yes N/A

Food Purchaser _____ Date to Purchase: _____

Patrol

Meal Planner Complete: Yes N/A

Approved Meal Plan: Yes N/A

Patrol Box Equipped: Yes N/A

Meal Money Collected: Yes N/A

Food Purchaser _____ Date to Purchase: _____

Notes:





Troop 53 Outdoor Activity Schedule

Note: Planning should start three months prior to the activity.

Date	Time	Duration	Activity





Troop 53 Outdoor Activity Sign-up

Note: Planning should start three months prior to the activity.

Scouts

Scouts

1 _____	22 _____
2 _____	23 _____
3 _____	24 _____
4 _____	25 _____
5 _____	26 _____
6 _____	27 _____
7 _____	28 _____
8 _____	29 _____
9 _____	

Leaders

10 _____	
11 _____	1 _____
12 _____	2 _____
13 _____	3 _____
14 _____	4 _____
15 _____	5 _____
16 _____	6 _____
17 _____	7 _____
18 _____	8 _____
19 _____	9 _____
20 _____	10 _____
21 _____	11 _____

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