

**APPENDIX I**  
**Cub Scout**  
**Outdoor Program Checklist**

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Date(s) \_\_\_\_\_

Location \_\_\_\_\_

BSA facility

Council-approved non-BSA facility

**I. Administration**

Tour permit

Camp reservation made

Parent permission slips

Camp deposit/fee paid

Health forms

Local requirements

Insurance

Licenses and permits  
(fishing, boat, campfire, parking, etc.)

**II. Leadership**

Event leader \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Assistant \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Program leader \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Assistant \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

**III. Transportation**

Driver	No. of seat belts	Driver License No.	Auto Insurance Yes/No
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Equipment hauled by \_\_\_\_\_

**IV. Location**

Maps prepared \_\_\_\_\_

Assembly location \_\_\_\_\_

Departure time \_\_\_\_\_

Camp arrival time \_\_\_\_\_

Camp departure time \_\_\_\_\_

Anticipated return time \_\_\_\_\_