



# BOY SCOUTS OF AMERICA

## CATALINA COUNCIL

### Climbing and Rappelling

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## CLIMBING MERIT BADGE

Scouts must be at least 14 years of age to participate in the Climbing Merit Badge program. Scouts wanting to participate in this program must commit to dedicating two entire full days. This is necessary to allow for total immersion in the program in order to teach the skills necessary to insure the safety of all participants. Due to the nature of the activity we are required to limit the number of Scouts per session. **PARTICIPATING SCOUTS MUST BE PRE-REGISTERED FOR CLIMBING!** Slots will be filled on a first come, first serve basis; to be determined by the date the pre-registration forms are received at the Council offices. Please complete the Unit Climbing Pre-registration Form and submit it to the Council office as soon as possible. This will allow us to schedule a sufficient number of instructors to support the program following the guidelines and requirements as dictated by the current year BSA National Standards.

All participants must have a **CURRENT BSA MEDICAL FORM** and parents must complete a **HOLD HARMLESS/CONSENT TO TREAT/ AGREEMENT. THERE WILL BE ABSOLUTELY NO EXCEPTIONS TO THIS RULE!!!**

All required forms are in the “Camp Forms and Documentation” section of this leaders guide.





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## HOLD HARMLESS AGREEMENT/TALENT RELEASE FORM

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I understand that participation in the activity involves a certain degree of risk that could result in injury or death. In consideration of the benefits to be derived, after carefully considering the risk involved, and in view of the fact that the Boy Scouts of America is an organization in which membership is voluntary, I have carefully considered the risk involved and have given consent for myself (or my son or daughter) to participate in the activity, and waive all claims I or we may have against the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity.

I am not under the influence of any chemical substance, including alcohol. Understanding that any physical activity involves a risk of injury, I understand that my participation in the activity is entirely voluntary. I release the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity from any and all claims or liability arising out of this participation. This release does not, however, apply to any harm caused by negligence or willful misconduct of the local council or its employees.

In case of emergency involving my child, I understand every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the physician selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child.

Participant's signature\* \_\_\_\_\_ Date \_\_\_\_\_

\*If the participant is under age 18, his or her parent or guardian must also sign below:

Parent's or guardian's signature \_\_\_\_\_ Date \_\_\_\_\_

I hereby assign and grant to the local council and the Boy Scouts of America the right and permission to use and publish the photographs/film/videotapes/electronic representations and/or sound recordings made of me or my child by the Boy Scouts of America, and I hereby release the Boy Scouts of America from any and all liability from such use and publication.

I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage, and/or distribution of said photographs/film/videotapes/electronic representations and/or sound recordings without limitation at the discretion of the Boy Scouts of America, and I specifically waive any right to any compensation I may have for any of the foregoing.

Yes  No

Participant's signature\* \_\_\_\_\_ Date \_\_\_\_\_

\*If the participant is under age 18, his or her parent or guardian must also sign below:

Parent's or guardian's signature \_\_\_\_\_ Date \_\_\_\_\_