

# Troop 303

## Tomales Bay "Kayak-in" Camping

### October 15-16, 2016



Tomales Bay is one of the most stunning kayaking destinations in California. We will paddle along the granite cliffs and forested hills of Tomales Bay. This trip is unique in that we will kayak to one of the Bay's secluded beaches accessible only from the water to camp for one night. As our kayaks glide across the water, a Harbor Seal may pop its head up and surprise us only a few feet away. Paddling along, an Osprey, Pelican or Kingfisher may dive for their lunch right before our eyes!

#### **Deadline for Signup:**

Permission slip, waiver form and checks made payable to Boy Scout Troop 303 due Wednesday, October 5. (Can be dropped off at Troop Meeting or mailed to Catherine Pines, 76 Evergreen Dr., Orinda CA 94563). Trip is limited to 20 participants so sign up early to be sure to get a spot!

#### **Cost per scout:**

\$110 includes kayak rental, Dutch oven treats and lunch on ride home (patrols are responsible for one dinner and breakfast)  
Cost per adult: \$84

#### **Departure:**

Meet at St. Stephen's Church at 8:00 am Saturday morning in your class B T-shirt. Scouts will be dropped off at their homes Sunday afternoon. Scouts must travel with the Troop

#### **What to bring:**

Bag lunch for Saturday, swim suit, towel, sunscreen, water/spare shoes, 2 - 2qt. water bottles camping gear, rain gear, mess kit, Class B T-shirt, warm jacket, flashlight, camp chair. Suggested packing list is attached.

#### **Leader:**

Jim Brovelli, (925) 997-8437

**Orinda Troop 303  
Permission to Participate**

\_\_\_\_\_ has my permission to participate in the following outing with Orinda Troop 303: **October 15-16 Tomales Bay "Kayak-in" Campout**

**Meet at:** St. Stephen's Parking Lot @ 8:00 am on Saturday, October 15

**Returning:** Around 2:00 pm on Sunday, October 16; scouts to be dropped off at home

**Cost of the Activity:** \$110 per scout. \$84 per adult.

**Adult in Charge:** Jim Brovelli, (925) 997-8437

Emergency telephone and cell numbers during the length of the outing are (please include at least one person other than yourself):

1. Name & telephone and cell: \_\_\_\_\_

2. Name & telephone and cell: \_\_\_\_\_

**Permission to Treat:**

I hereby give permission to the persons in charge of the above described scouting activity to render first aid to the above minor if necessary. In addition, I hereby authorize the persons in charge of the above described scouting activity to act as an agent of the undersigned to consent to any x-ray examination, anesthetic, medical, dental, or surgical diagnosis or treatment, and hospital care for the above minor which is deemed advisable by, and to be rendered under the general or special supervision of, any physician or surgeon licensed under the provision of the Medical Practice Act or any dentist licensed under the Dental Practice Act, whether such diagnosis or treatment is rendered at the office of said physician or dentist, at a hospital, or elsewhere; to release any records necessary for insurance purposes; and to provide or arrange necessary related transportation.

**Permission to Administer Medication:**

The following over the counter pain relievers may be administered to the above minor (check as appropriate):

() Ibuprofen () Acetaminophen

**Scouts must travel with the Troop**

**Name of Parent also attending:** \_\_\_\_\_ **Can Drive # of scouts:** \_\_\_\_\_

**Signed:** \_\_\_\_\_  
(Parent/Guardian)

**Date:** \_\_\_\_\_



## Equipment List for Overnights

### For Paddling:

- Sun screen and lip balm
- Hat with sun visor
- Sunglasses with retention strap
- 2 one-quart water bottles
- Swimsuit and/or nylon (quick dry) shorts
- Windbreaker (or use one of our paddle jackets)
- 2 sets of paddling clothes. Wool, capilene, poly pro, or some other synthetic long sleeve, long underwear shirt that will keep you warm when it is wet. **Cotton or cotton blend clothing is not appropriate**, as cotton retains water and will keep you cold when it becomes wet.
- T-shirt for warmer days.
- Shoes you don't mind getting wet. Teva type river sandals, wetsuit booties, or aqua socks work very well. Tennis shoes with wool socks will work. Avoid flip-flop type sandals that do not attach to your feet.
- **Please note:** Open-deck (or sit-on-top) kayaks require the use of a wetsuit, which is provided by Blue Waters. For the sake of personal hygiene, please plan to wear a bathing suit under your wetsuit.

### For Camping:

- Compact sleeping bag & sleeping pad
- Backpacking-style tent
- Pile or fleecce pullover, sweatshirt or wool sweater
- Lightweight rain gear
- 2 changes of warm clothes including dry shoes for camp and light hiking
- 2 pairs of warm socks (avoid cotton if possible)
- Towel and toiletries
- Wool or fleecce hat and warm gloves (for cold nights)
- Flashlight & extra batteries
- Personal drinking mug, plates & utensils
- Backpacking stove (propane or butane)
- Plastic garbage bags

### Packing Suggestions:

Pre-pack your gear into heavy-duty trash-compactor bags (none larger than the size of a sleeping bag) and double bag it before stuffing it into the kayak hatches. Blue Waters also rents dry bags for a nominal fee. Motorboat support is available at an extra charge for those who have more gear than would fit into the kayaks (e.g., BBQ grill, coolers, chairs, etc). Please arrange for this service in advance of your trip.

Both Marshall & Tomales Beaches have porta-potties available. If you plan to camp at any other beach/cove, please bring a sealable container (Tupperware works well) for packing out human waste. Alternatively, Blue Waters Kayaking sells biodegradable WAG bags for human waste at our Marshall and Inverness sites.

Administrative office • Tel: 415-669-2600 • Fax: 415-669-9698

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**PARTICIPANT AGREEMENT, INDEMNIFICATION, AND ASSUMPTION OF RISK FOR MINORS**

(Must be completed by parent or legal guardian for participants under the age of 18)

I acknowledge that my child's participation in sea kayaking activities entails known and unanticipated risks that could result in physical or emotional injury, or death to my child, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

I, as a parent or guardian of the below named minor, hereby give my permission for my child or ward to participate in the above named activity(s) and further agree to the terms herein contained. In consideration of \_\_\_\_\_ (print minor's name) ("Minor") being permitted by Blue Waters Kayaking (hereinafter collectively referred to as BWK) to participate in its activities and to use its equipment and facilities, I agree to indemnify and hold harmless BWK from any and all claims, demands, or causes of action which are brought by myself, and/or the minor and/or on behalf of the Minor against BWK, and which are in any way connected with such use or participation by Minor. In the event that I file a lawsuit against BWK, I agree to do so solely in the state of California, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

I hereby represent that the minor is in good health, that I have identified all medical conditions associated with the minor, and that I have adequately informed BWK personnel of any special instructions regarding the minor. I certify that I have adequate insurance to cover any injury or damage the minor may suffer while participating, or else I agree to bear the costs of such injury or damage myself.

I authorize BWK personnel to call for medical care for the minor or to transport the minor to a medical facility or hospital if, in the opinion of such personnel, the minor needs medical attention. I further authorize appropriate personnel to render such medical treatment as is necessary for the health of the minor, in their professional opinion. I agree that once the minor is in the care of medical personnel or a medical facility, BWK shall have no further responsibility for the minor and I agree to pay all costs associated with such medical care and transportation.

Parent or Guardian \_\_\_\_\_

Print Name \_\_\_\_\_

Address \_\_\_\_\_

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_

Health Insurance provider \_\_\_\_\_

Date \_\_\_\_\_