



VENTURING – BSA
Venturing Leadership Skills Course
and
Leader Specific Training

Leadership is one of the biggest challenges in our society today. In recent surveys, public opinion concerning leadership was reported to be at an appalling level. Of the adults questioned in one survey, 55 percent expressed feeling of alienation from those in leadership positions, and only 18 percent felt they could count on their supervisors.

Our educational systems are constantly challenged to deal with the issue of leadership training for students. Not only to provide the knowledge needed for their chosen careers, but also the "social conscience" and "team mentality", as well as the know how to deal with "the people side" of leadership.

The Venturing Division of the Boy Scouts of America has created a series of training opportunities to address this leadership issue with young adults involved in the *Venturing, BSA* program. This course has been designed to be run by the crew Advisor and officers to teach leadership skills to the entire crew. Completion of this course is a requirement for a youth earning the Silver Award. At this time, this course is also a prerequisite for the **Kodiak** and **Kodiak-X** training. It is available to all members of a Venture Crew and Sea Scout Ship.

We will also conduct the Leader Specific Training for Adult Venturing Leader if there is a need in your unit. This will be done while the youth are completing VLSC training. Please contact us if you have any questions.

Circle Ten will host a VLSC on January 22-23, 2010 at Camp Wisdom for \$15.00 which includes all meals and materials. Check in will be at 7:00 p.m. on Friday and finish by 5:30 p.m. on Saturday. Classes will be conducted by youth members and adults. This is a hands on course with includes the classroom, outdoors and the COPE Course.

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NAME: _____ CREW/SHIP NO. _____

ADDRESS: _____ PHONE NO. _____

Please let us know if you have any dietary problems and be sure to attach or bring to VLSC a current physical.

If you have any questions, please contact: Earl Baker: webaker@sherwin.co, OR Sharon Lee: 214.478.6850, slee75044@yahoo.com

DEADLINE FOR REGISTRATION IS JANUARY 19, 2010

VLSC PERMISSION SLIP

THIS SLIP MUST BE SIGNED FOR SCOUT/VENTURER TO PARTICIPATE

I, _____, the parent/legal guardian of _____, give my permission for him/her to attend and participate fully in the Venturing Leadership Skills Course at Camp Wisdom, from January 22, 2010 through January 23, 2010.

Waiver of Responsibility

In consideration of the benefits to be derived, and given that the Boy Scouts of America is a voluntary educational organization, I hereby agree to my daughter/son's participation and expressly waive and release any and all claims against adult leaders of Circle Ten Council and all officers, agents, and representatives of the Boy Scouts of America arising out of or in connection with the above-referenced event or activity.

I understand adult leaders will be transporting participants to and during the trek activities. I understand also that if, in the sole opinion or discretion of the adult leaders, my son/daughter/ward fails to participate in planned activities or assigned duties, does not abide by rules of good safety, disrupts the conduct of the activity, or continually shows disrespect for the leaders, adults, or fellow Scouts/Venturers, HIS/HER PARENT / GUARDIAN WILL BE REQUIRED TO MAKE ARRANGEMENTS TO TRANSPORT HIM HOME.

Medical Release

In the event of illness or injury occurring to my son or daughter while involved in this activity, I consent to X-ray examination, anesthesia, and or medical or surgical diagnostic procedures or treatment considered necessary in the best judgment of the attending physician and performed by or under the supervision of the medical staff of the hospital furnishing medical services. It is understood that in the event of a serious illness or injury, reasonable efforts to reach me will be attempted.

Medical Insurance Company

Personal Physician

Policy Number

(_____)_____
Physician Telephone Number

Media Release

For value received, I hereby consent to the use of my (or my daughter's or son's if participant is under 21) name, voice and /or pictures by the Boy Scouts of America, and/or any movie, news, or broadcasting companies or their licensees for broadcasting, direct exhibition, publication and subsidiary purposes. Such uses will not be made which would constitute a direct endorsement by said participant or adult of any product or service.

Signature

Parent/Guardian Name: _____ Phone: _____

Parent/Guardian Name: _____ Phone: _____

Address: _____

Parent/Guardian Contact Number during VLSC Training () _____ - _____

For Use by Notary Public if Required

In an effort to provide better child protection, certain states and foreign countries now require all releases covering minors to be notarized.

Subscribed and sworn to before me on this the _____ day of _____,

My commission expires _____, _____

Signature of notary public _____