

# TOUR AND ACTIVITY PLAN

Date \_\_\_\_\_

Pack  Troop/team  Crew/Ship  Contingent unit/crew

Unit No. \_\_\_\_\_ Chartered organization \_\_\_\_\_

Council name/No. \_\_\_\_\_ / \_\_\_\_\_

District \_\_\_\_\_

Description of tour or activity \_\_\_\_\_

From (city and state) \_\_\_\_\_ to \_\_\_\_\_

Dates \_\_\_\_\_ to \_\_\_\_\_ Total days \_\_\_\_\_

**Itinerary:** It is required that the following information be provided for *each day* of the tour. (Note: Speed or excessive daily mileage increases the possibility of accidents.) Attach an additional page if more space is required. Include detailed information on campsites, routes, and float plans, and include maps for wilderness travel as required by the local council.

For office use <b>Tour and activity plan No.</b> _____ <b>Date received</b> _____ <b>Date reviewed</b> _____  <p style="text-align: center;"><b>Council stamp/signatures</b></p>
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Date	Travel		Mileage	Overnight stopping place (Check if reservations are cleared.)	✓
	From	To			

**Type of trip:**  Day trip  Short-term camp (less than 72 hours)  Other (OA Weekend, etc.) \_\_\_\_\_  
 Long-term camp (longer than 72 hours)  High-adventure activities  High-adventure base \_\_\_\_\_

Party will consist of (number): ____ Youth—male      ____ Youth—female ____ Adults—male      ____ Adults—female	Party will travel by (check all that apply): <input type="checkbox"/> Car <input type="checkbox"/> Bus <input type="checkbox"/> Train <input type="checkbox"/> Plane <input type="checkbox"/> Van <input type="checkbox"/> Boat <input type="checkbox"/> Other _____
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**Leadership and Youth Protection Training:** Boy Scouts of America policy requires at least two adult leaders on all BSA activities. Coed Venturing crews must have both male and female leaders older than 21 for overnight activities. All registered adults must have completed **BSA Youth Protection training**. At least one registered adult who has completed BSA Youth Protection training must be present at all events and activities. Youth Protection training is valid for two years from the date completed.

Adult leader responsible for this group (must be at least 21 years old):

Name \_\_\_\_\_ Age \_\_\_\_\_ Scouting position \_\_\_\_\_

Address \_\_\_\_\_ Member No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_ Youth Protection training date \_\_\_\_\_

Assistant adult leader name(s) (minimum age 18, or 21 for Venturing crews):

Name \_\_\_\_\_ Age \_\_\_\_\_ Scouting position \_\_\_\_\_

Address \_\_\_\_\_ Member No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_ Youth Protection training date \_\_\_\_\_

**Attach a list with additional names and information as outlined above.**

- Our travel equipment will include a first-aid kit and a roadside emergency kit.
- The group will have in possession an **Annual Health and Medical Record** for every participant.

We certify that appropriate planning has been conducted using the **Sweet 16 of BSA Safety**, qualified and trained supervision is in place, **permissions** are secured, health records have been reviewed, and adult leaders have read and are in possession of a current copy of **Guide to Safe Scouting** and other appropriate resources. Any items needing attention will be resolved before the tour or activity date.

\_\_\_\_\_  
Signature: Committee chair or chartered organization representative

\_\_\_\_\_  
Signature: Adult leader

**Unit single point of contact (not on tour)**

Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_



**Tour involves:**  Swimming     Boating     Climbing     Orientation flights (attach **Flying Plan** required)  
 Wilderness or backcountry (must carry **Wilderness Use Policy** and follow principles of **Leave No Trace**)  
 Shooting     Other (specify) \_\_\_\_\_

**Activity Standards:** Where swimming or boating is included in the program, **Safe Swim Defense** and/or **Safety Afloat** are to be followed. If climbing/rappelling is included, then **Climb On Safely** must be followed. At least one person must be current in CPR/AED from any recognized agency to meet **Safety Afloat** and **Climb On Safely** guidelines. At least one adult on a pack overnighter must have completed **Basic Adult Leader Outdoor Orientation (BALOO)**. At least one adult must have completed **Planning and Preparing for Hazardous Weather** training for all tours and activities. **Trek Safely** and Basic First Aid are recommended for all tours, and **Wilderness First Aid** is recommended for all backcountry tours.

Expiration date of commitment card/training (two years from completion date)							
Name	Age	Youth Protection	Planning and Preparing for Hazardous Weather	BALOO (no expiration)	Climb On Safely	Safe Swim Defense	Safety Afloat
Name	Age	CPR Certification/Agency		CPR Expiration Date	First-Aid Certification/Agency		First Aid Expiration Date
Name	Age	NRA Instructor and/or RSO					
		No. _____	<input type="checkbox"/> Rifle <input type="checkbox"/> Shotgun <input type="checkbox"/> Pistol (Venturing only) <input type="checkbox"/> Range Safety Officer <input type="checkbox"/> Muzzle-loading rifle <input type="checkbox"/> Muzzle-loading shotgun				
		No. _____	<input type="checkbox"/> Rifle <input type="checkbox"/> Shotgun <input type="checkbox"/> Pistol (Venturing only) <input type="checkbox"/> Range Safety Officer <input type="checkbox"/> Muzzle-loading rifle <input type="checkbox"/> Muzzle-loading shotgun				

**Unauthorized and Restricted Activities:** The BSA's general liability insurance policy provides coverage for bodily injury or property damage that arises out of an official Scouting activity as defined by the **Guide to Safe Scouting**. Volunteers, units, chartered organizations, and local councils that engage in unauthorized activities are jeopardizing their insurance coverage. PLEASE DO NOT PUT YOURSELF AT RISK.

**INSURANCE**

**All vehicles MUST be covered by a liability and property damage insurance policy.** The amount of this coverage must meet or exceed the insurance requirement of the state in which the vehicle is licensed and comply with or exceed the requirements of the country of destination for travel outside the United States. It is recommended, however, that coverage limits are a \$100,000 combined single limit. Any vehicle designed to carry 10 or more passengers is required to have a \$500,000 combined single limit. In the case of rented vehicles, the requirement of coverage limits can be met by combining the limits of personal coverage carried by the driver with coverage carried by the owner of the rented vehicle.

If the vehicle to be used is designed to carry more than 15 people (including the driver), the driver must have a valid commercial driver's license (CDL). In some states (California, for example), this policy applies to drivers of vehicles designed to carry 10 or more people.

All vehicles used in travel outside the United States must carry a public liability and property damage liability insurance policy that complies with or exceeds the requirements of that country. Attach an additional page if more space is required.

Name \_\_\_\_\_ CDL expires \_\_\_\_\_

Name \_\_\_\_\_ CDL expires \_\_\_\_\_

MAKE	MODEL	YEAR	NUMBER OF SAFETY BELTS	DRIVER/OWNER	VALID DRIVER'S LICENSE (Y or N)	LIABILITY INSURANCE COVERAGE
						Combined Single Limit

# Boy Scouts of America Flying Plan

This completed application must be submitted with or attached to a tour and activity plan to the council office for review two weeks before the scheduled activity.

Unit No.: \_\_\_\_\_ City or town: \_\_\_\_\_ District: \_\_\_\_\_

Applies for a plan for a  Basic  Advanced orientation  Tethered balloon Flight on: \_\_\_\_\_  
Date

**Basic orientation flight.** This flight will be within 25 nautical miles of the departure airport, with no stops before returning. The pilot must have at least a private pilot's certificate, at least 250 hours of total flight time, be current under FAR 61 to carry passengers, and have a current medical certificate under FAR 61. *Tiger Cubs, Cub Scouts, Boy Scouts, and Varsity Scouts are restricted to this type of flight.*

**Advanced orientation flight.** This flight will be within 50 nautical miles of the departure airport, and the plane may land at other locations before returning. The pilot must have at least a private pilot's certificate and 500 hours of total flight time. The pilot must be current under FAR 61 to carry passengers and have a current medical certificate under FAR 61. *Only Venturers and Venturing leaders may participate in advanced orientation flights.*

**Tethered balloon flight.** Flights will be conducted in an open area of at least 200 feet by 200 feet clear of obstructions, utility lines, fences, trees, etc. Permission to use the property has been secured. The maximum above ground limit (height) is 70 feet. The flight must occur between sunrise and sunset.

Name of the airport where the flight will originate and terminate: \_\_\_\_\_

Describe the area where tethered ballooning will occur: \_\_\_\_\_

Permission from the landowner to go tethered ballooning has been secured.  Yes  No

Total number of participating youth: \_\_\_\_\_ Total number of participating adults: \_\_\_\_\_

- A tour and activity plan is attached to this application.
- A parent or guardian consent form for each youth participant is attached to this application.
- All required aircraft, insurance, and pilot documentation is satisfied.

We certify that appropriate planning has been conducted using the Sweet 16 of BSA Safety, qualified trained supervision is in place, permissions are secured, health records have been reviewed, and adult leaders have read and are in possession of a current copy of the *Guide to Safe Scouting* and other appropriate resources.

\_\_\_\_\_  
Signature of committee chair or chartered organization representative

\_\_\_\_\_  
Signature of adult leader

**For council use only: Complete and return a copy to the unit.**

## Official Flying Plan—Boy Scouts of America

Tour and activity plan number: \_\_\_\_\_ Date issued: \_\_\_\_\_

Council Stamp/Signatures/Reviewer



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## Aircraft/Balloon

Owner(s): \_\_\_\_\_ Date of last annual inspection: \_\_\_\_\_

Make and model: \_\_\_\_\_ Number: \_\_\_\_\_

Standard airworthiness certificate category (normal/utility/etc.): \_\_\_\_\_

**Note:** Only aircraft with standard airworthiness certificates may be used for orientation flights. Restricted, limited, light sport, and experimental category airworthiness certificates are not authorized.

Reproduce this page as needed for additional aircraft/pilots.

## Insurance

All aircraft owners must have at least \$1 million aircraft liability coverage, including passenger liability with sublimits of no less than \$100,000. List all insurance policies that in combination satisfy the insurance requirement.

Insurance company: \_\_\_\_\_

Amount: \$ \_\_\_\_\_ Policy number: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Insurance company: \_\_\_\_\_

Amount: \$ \_\_\_\_\_ Policy number: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Experimental Aircraft Association (EAA) Young Eagle Flights (ages 8–17): For those EAA members who choose to insure at \$100,000 per passenger seat, the EAA automatically provides an additional \$1 million liability umbrella policy with sublimits of no less than \$100,000. This coverage is in effect only while participating in Young Eagle Flights. The EAA's insurance telephone number is 800-236-4800, ext. 6106.

EAA member number: \_\_\_\_\_. **We strongly recommend that all orientation flights be conducted in collaboration with local EAA chapter Young Eagle Flights.** To find a local chapter, visit [www.eaa.org/chapters/locator](http://www.eaa.org/chapters/locator).

## Pilot-In-Command

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Type of pilot certificate: \_\_\_\_\_ (Attach a copy of current pilot certificate. Balloon pilots must hold a commercial certification.)

Ratings: \_\_\_\_\_

Pilot medical certificate:  First  Second  Third class (Attach a copy of current medical certificate. Applicable to ALL flights.)

Medical valid until: \_\_\_\_\_ (date)

Limitations: \_\_\_\_\_

Pilot's total number of flight hours: \_\_\_\_\_ (250 hours minimum for basic orientation flights; 500 hours minimum for advanced orientation flights)

Balloon pilot's total number of flight hours: \_\_\_\_\_ (100 hours minimum)



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# Notes and FAQs for Completing Flying Plan

## Tour Leader

You are responsible for completing the tour and activity plan and this application as required by the local council, obtaining parental consent for all participants, and gathering required insurance information and support material from the aircraft owner and pilot. Tour leaders are responsible for obtaining approval by unit leadership. Tour leaders must submit completed applications to the council at least two weeks in advance of the activity. Councils may require additional time for special activities, and unit leaders completing this application should plan accordingly.

## Pilot, Aircraft Owner, and Insurance Information

Attach additional copies of this information for each aircraft or balloon that will be used, each pilot-in-command, and applicable insurance information. Pilot information must include copies of the pilot's current certificate and medical certificate.

## Parents/Guardians

A consent form, No. 680-673, for each participant under 21 years of age must be completed by the youth's parent or guardian.

## Local Council Office Checklist

Review that all requested information (listed below) has been provided on the application. Affix the council stamp at the bottom of page 1, and return a copy of all pages to the unit leader.

- Parent or guardian consent form for each youth participant attached to this application
- A copy of each pilot's certificate and medical certificate attached to this application
- Pilot total hours required (250 hours for basic orientation flights; 500 hours for advanced orientation flights; 100 hours for tethered ballooning)
- Aircraft or balloon insurance requirements satisfied
- Tour and activity plan completed

**Tethered balloon guidelines and FAQs can be found here.**

## FAQs

- Q:** My pilot certificate number is my Social Security number. May I strike through it or white it out on the required copy?
- A:** Yes. It is recognized that pilots who have not had their Social Security numbers removed from their pilot certificates may strike out the information.
- Q:** Our pilot only has the new sport pilot rating. Can he be a pilot-in-command of the orientation flight?
- A:** No. Sport pilot certificates are not authorized as no medical is required.
- Q:** Our unit has been offered an orientation flight by the U.S. military, but not all the information required on the application can be obtained. May we still conduct the orientation?
- A:** Commissioned officers and warrant officers of any armed service may act as pilot-in-command of a military airplane or helicopter in which they are current as the aircraft commander for either a basic or advanced orientation flight. Only the aircraft portion identifying the aircraft as military and a parent or guardian consent form for each youth participant are required.
- Q:** Since we encourage Young Eagle Flights, can we utilize experimental aircraft?
- A:** No. Only aircraft with standard airworthiness certificates may be used on orientation flights.
- Q:** Is an aviation medical required for glider or tethered balloon pilots?
- A:** Yes. For consistency, a valid medical is required.



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