

**BALTIMORE AREA COUNCIL, BOY SCOUTS OF AMERICA
2010 CARROLL DISTRICT SWIM PROGRAM
WEBELOS**

- WHAT:** An opportunity for Webelos to attempt the Aquanaut Activity Badge. We will attempt to complete the Aquanaut Activity Badge mandatory requirements #1, 2, and 3 and the optional requirements # 4, 5, and 8. Webelos attending should have the swimming ability to complete these 6 requirements.
- WHERE:** McDaniel College Swimming Pool, located just west of Pennsylvania Avenue in Westminster, on Monroe Street extended west of Pennsylvania Avenue.
- WHEN:** Sat. Feb. 20, 2010, 7:15 PM to 9:30 PM
Sat. Feb. 27 2010, 7:15 PM to 9:30 PM
Sat. Mar. 6, 2010, 7:15 PM to 9:30 PM
- BRING:** Swim suit (no cutoffs) and a towel.
- COST:** \$4.00 for each 2 hour session. One session should be sufficient for most Webelos to complete the badge requirements. Make checks payable to Baltimore Area Council, B.S.A. and mail along with the Permission Slip to the address stated on the Permission Slip. Prepayment and preregistration is required before Feb. 8, 2010. There will be no registration at the pool. When arriving at the pool, please check in with Mr. Schultz. Do not submit registrations to the Baltimore Area Council.
- LIMIT:** 25 Webelos for each of the three sessions.
- OTHER:** Each Webelo or group of Webelos should have an adult present to help if needed, including entering the water. Parents not assisting are requested to sit in the stands as there is limited room on the pool deck. If any Webelo needs some swimming instruction, this will be available on a limited basis. Any such Webelo may want to sign up for additional sessions. This can be done at the pool if a Webelo needs to return to complete the badge. Any questions, please call Hank Reinhardt at 410-876-2937.

**PERMISSION SLIP
2010 CARROLL DISTRICT SWIM PROGRAM
WEBELOS**

Detach and Mail to: Hank Reinhardt, CDSP
2439 Hughes Shop Road
Westminster, Maryland 21158

\$ _____
Amount Enclosed
Checks Payable to
Baltimore Area Council, B.S.A.

_____ has my permission to participate in the 2010

Full Name (Please Print)

Carroll District Swim Program. To my knowledge he is in good physical condition for swimming activities which is based on a recent physical examination by a physician.

Please check the date desired:

_____ Feb. 20, 2010

_____ Feb. 27, 2010

_____ Mar. 6, 2010

Parent's Signature

Date

Pack #

Telephone #