



# Fall Merit Badge Camporee

## Camp Long Lake

### October 7-8, 2022



**Activities:**

Work on completing Merit Badges  
(see attached schedule)

→ Please indicate 5 MB choices ←  
in order of preference  
(Spots fill up fast,  
so you'll need options)

**Cooking:**

Breakfast, lunch & dinner in camp dining  
hall

**Leadership:**

Bill Selle  
Terry Hoepfner (Friday night only)

**2 adults are needed to  
attend to provide  
adequate supervision!**

**Bring:**

- Uniform
- Warm clothes
- Rain gear
- Bug spray
- Tent
- Flashlight
- Sleeping Gear
- Personals (toothbrush, etc.)
- Merit badge prerequisites

**Don't Bring:**

- Cell Phones (youth)
- Electronics
- Sheath Knives
- Fireworks



**Fees:**

- \$30 per Scout (Troop will pay balance)
- \$30 per adult

→ Fee is \$40 after ~~Sept 6~~ ←  
FEE IS \$50 AFTER OCT 1

Troop will pay any extra Merit Badge fees.

Please indicate adult T-shirt size when you  
return the permission slip.

**Travel Plans:**

Meet at St John's on Fri, Oct 7 at 5:30 pm  
Return to St John's on Sat, Oct 8 at 9:30 pm

**Emergency Contacts:**

Bill Selle 262-442-0018  
Terry Hoepfner 262-309-8497

Return permission slip and \$30 fee by  
Tuesday, Sept 6, making checks payable to  
Terry Hoepfner.

Potawatomi County Council Troop 16

Boy Scouts of America

I hereby grant permission for my son, \_\_\_\_\_ to go to the **Potawatomi Council Fall Merit Badge Camporee** under the leadership of Bill Selle. We will meet at St. John's on Friday, Oct 7 at 5:30 pm and return to St. John's on Saturday, Oct 8 at 9:30 pm.

- |  |   |
|--|---|
| <input type="checkbox"/> Father/Mother/Guardian will go        | <input type="checkbox"/> We can transport _____ persons                       |
| <input type="checkbox"/> Father/Mother/Guardian will not go    | <input type="checkbox"/> Any condition now requiring medication or treatment: |
| <input type="checkbox"/> Father/Mother/Guardian can drive out  | _____   |
| <input type="checkbox"/> Father/Mother/Guardian can drive back |   |

Circle T-shirt size: Med Lg XL 2XL (adult sizes)

During this time, I may be reached at:

\_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Address City Phone

In the event I cannot be reached and emergency medical treatment is required, you may contact:

\_\_\_\_\_ OR  
Name Phone

You may authorize medical authorities to prescribe such treatment.

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Signed \_\_\_\_\_

Return permission slip and \$30 fee by Tuesday, Sept 6, making checks payable to Terry Hoepfner.