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# FACILITY RENTAL GUIDE FOR THE SCOUTING ADVENTURE CENTER

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Scout Units/ Non-scout Groups/ Pricing Guide/ Required Forms



JULY 30, 2024  
GREAT RIVERS SCOUTING  
6081 W Van Horn Tavern Rd, Columbia, MO 65203

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# SCOUT GROUP'S FACILITY RENTAL GUIDE

## Introduction

The Great Rivers Council is proud to provide the opportunity for scouting units to use their facilities and programs.

## Guidelines for Use of the Scouting Adventure Center by Scouting Groups

1. Reservations and applications for use of council facilities are to be made to Great Rivers Council utilizing their online [Facility & Equipment Reservation System](#).
2. Payments will be required to the council in advance; otherwise, the use may be cancelled at the discretion of the Scout Executive or his/her designee.
3. Reservations are accepted on a first come, first-served basis.
4. A deposit may be required at the time the reservation is made. This deposit will be put towards the remaining balance of the overall payment due. Additionally, if there is any reason to believe that the use may involve damage beyond that of ordinary wear and tear, the Scout Executive may require advance payment, in the form of a security deposit, against loss. The Scout Executive also reserves the right to revoke the reservation for cause.
5. When Great Rivers Council employees are utilized, appropriate fees will be charged to the scout group. As an example Rangemasters are required for the use of the inflatable ranges which may incur an additional cost.
6. The scout group shall be responsible for damage to the facilities and equipment as a result of their negligence, as well as ensuring there is proper supervision and chaperones.
7. The Great Rivers Council Scout Executive or his/her designee is responsible for granting permission to use the council property, for the rules and regulations governing such use, and for the rent/fee to be paid. Great Rivers Council property will be rented for other than Scouting purposes only when there is no interference with Scouting activities.

## Cancellation Policy

Facility reservation fees are final. Refunds may be granted only if a cancellation is requested. Individuals/Units/Groups that cancel their reservations 30 days or more prior to the arrival date will receive a refund of the total rental fee less a 25% administrative service charge (*Generally the amount for the Reservation Deposit*). Refunds requested between 15 and 30 days of the reservation will receive a refund of the total rental fee less a 50% administrative service charge. No refunds will be given for cancellations made less than 14 days prior to the arrival date. Any/all refund requests must be made within 14 days of the reservation date.

To request a refund please follow this link: [Refund Request Form](#)

# Rules, Terms & Conditions for Scout Group Use of Scout Camps/Facilities

1. The Scouting Group shall pay the Council the Use Fee stated in the reservation prior to use of the facilities.
2. The Scouting Group agrees that the group will abide by these Rules, Terms & Conditions, and any additional instructions of the camp Ranger and/or a Council-designated camp/local council management team member.
3. The Scouting Group agrees to provide at least one adult leader (defined as 21 years of age or older) for every ten (10) members of its group below the age of 21 years; at least two of the said leaders must be YPT trained and always be present with the group while at the facilities or in camp.
4. While Scouting makes every effort to accommodate all persons with disabilities, Scouting America is a charitable, private organization not subject to the ADA. Any group who uses the facilities or camps is responsible for ADA compliance and any accommodation necessary for its participants and attendees.
5. All activities should be conducted on a smoke-free basis. Smoking or tobacco use in any part of the Council facilities and/or camp is prohibited, including controlled substances and/or illegal drugs are not permitted at any Council facility or camp property. This includes the use of electronic cigarettes, personal vaporizers, or electronic nicotine delivery systems that simulate tobacco smoking.
6. The following list includes items prohibited at the facilities: fireworks; alcoholic beverages; narcotics; motorcycles; tobacco; personal firearms and ammunition. This list is not comprehensive. Please reference the Guide to Safe Scouting for other prohibited items. Individuals found in violation of these rules may be asked to leave camp and no refund will be given.
7. This application does not permit use of any machine, apparatus, equipment, or tools owned by the Council without proper permission by the Scout Executive or his/her designated team member.
8. Scouting Group shall confer with the appropriate Council staff to obtain permission to bring materials to rented spaces. The council assumes no responsibility for damage to personal property.
9. All laws, rules/ regulations regarding public assemblies must be strictly followed.
10. The Scouting Group shall make no alterations to and shall keep all facilities, spaces, and/or other Council property in good repair. All facilities, spaces, and/or other Council property used by the Scouting Group will be examined after use, and the Scouting Group agrees to leave same in clean condition, and promptly make good for any loss or damage occurring during use of said area, normal wear and tear excepted. If there is any reason to believe that the use may involve damage beyond that of ordinary wear and tear, the Scouting Group is required to pay the Council for such damage.
11. Any decorations, or equipment of the Scouting Group must be promptly removed after use so as not to interfere with the Scout or other activities. If there is a delay, the removal will be made by the Council at the expense of the Scouting Group.
12. On expiration of the time of use identified in the reservation, the Scouting Group shall vacate all facilities, spaces, and other Council property and return the same to the Council.

I, \_\_\_\_\_, hereby acknowledge that I am the authorized agent and responsible party responsible for the use Organization/Group. I further acknowledge that I have reviewed and understand the rules and regulations contained herein and agree to comply with all. I understand that failure to comply with the aforementioned rules will jeopardize the Organization/Group's future opportunities to use the local council facilities and/or camps.

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Signature of the Scouting Group Leader

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Date

---

Print Name

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Responsible Party's Position/Job Title

# NON-SCOUT GROUP'S FACILITY RENTAL GUIDE

## Introduction

The Great Rivers Council is proud to provide outside non-scout groups the opportunity to use their facilities and programs, provided that such use does not interfere with scouting operations. When non-scout groups want to use facilities and/or council employees, there are certain items that must be in place before these non-scout groups use council properties.

## Guidelines for Use of the Scouting Adventure Center by Non-scout Groups

1. Reservations and applications for use of council facilities are to be made to Great Rivers Council utilizing their online [Facility & Equipment Reservation System](#).
2. Payments will be required to the council in advance; otherwise, the use may be cancelled at the discretion of the Scout Executive or his/her designee.
3. Reservations are accepted on a first-come, first-served basis.
4. A deposit may be required when the reservation is made. This deposit will be put towards the remaining balance of the overall payment due. Additionally, if there is any reason to believe that the use may involve damage beyond that of ordinary wear and tear, the Scout Executive may require advance payment, in the form of a security deposit, against loss. The Scout Executive also reserves the right to revoke the reservation for cause.
5. When Great Rivers Council employees are utilized, appropriate fees will be charged to the non-scout group.
6. The non-scout group shall be responsible for damage to the facilities and equipment as a result of their negligence, as well as ensuring there is proper supervision and chaperones. (See [Rules, Terms & Conditions for Non-Scout Group Use of Scout Camps/Facilities](#).)
7. Each non-scout group shall present evidence of the purchase of organizational general liability insurance (Certificate of Insurance) with no less than \$1,000,000 per occurrence with a general aggregate of \$2,000,000 naming Great Rivers Council, Scouting America, and the National Council, Scouting America, named as additional insured (Remarks section to read, "Great Rivers Council, Scouting America, and the National Council, Scouting America, named as additional insured on a primary and non-contributory basis to include waiver of subrogation in regard to general liability as required by written contract or agreement.").

The minimum insurance coverage necessary is as follows:

1. General Liability:

General Aggregate Limit:	\$2,000,000
Products & Completed Operations Aggregate:	\$1,000,000
Personal & Advertising Injury Limit:	\$1,000,000
Each Occurrence Limit:	\$2,000,000
Medical Expense Limit:	\$5,000
2. Automobile Liability: \$1,000,000  
(If Organization/Group has owned vehicles on council property)
3. Workers Compensation and Employers Liability  
(If Organization/Group has paid employees on council property)
8. Each non-scout group shall agree to indemnify and hold harmless Great Rivers Council and Scouting America for incidents relating to the use/rental. Click Here for a downloadable [Release and Waiver of Liability Form](#).
9. All non-scout participants utilizing council ranges (climbing wall, Inflatable Ranges, and other designations) and our unique program areas will be required to complete the [Activity Consent Form](#) (Click Here for a downloadable PDF) prior to participating. Note: All participants under the age of 21 must have a parent or guardian's signature.
10. The Application for Non-scout Use of Council Property must be completed and submitted to Great Rivers Council using the [Facility & Equipment Reservation System](#) prior to the date of the use of the facility, along with a CERTIFICATE OF LIABILITY INSURANCE, signed RELEASE AND WAIVER OF LIABILITY and an approved copy will be returned as your authority to use the facility.
11. The Great Rivers Council Scout Executive or his/her designee is responsible for granting permission to use the council property, for the rules and regulations governing such use, and for the rent/fee to be paid. Great Rivers Council property will be rented for other than Scouting purposes only when there is no interference with Scouting activities.

## Cancellation Policy

Facility reservation fees are final. Refunds may be granted only if a cancellation is requested. Individuals/Units/Groups that cancel their reservations 30 days or more prior to the arrival date will receive a refund of the total rental fee less a 25% administrative service charge (*Generally the amount for the Reservation Deposit*). Refunds requested between 15 and 30 days of the reservation will receive a refund of the total rental fee less a 50% administrative service charge. No refunds will be given for cancellations made less than 14 days prior to the arrival date. Any/all refund requests must be made within 14 days of the reservation date.

To request a refund please follow this link: [Refund Request Form](#)

# Rules, Terms & Conditions for Non-Scout Group Use of Scout Camps/Facilities

1. The Application for Non-Scout Use of Council Property ("Application") must be filled out and submitted to Great Rivers Council prior to the date of the use of any camp or facility, along with a certificate of insurance and an executed Release and Waiver of Liability.
2. The Council grants use to the organization/group ("Organization/Group") identified in the Application for the facilities and/or spaces identified in the Application and for the dates and times stated in the Application.
3. The Organization/Group shall pay the Council the Use Fee stated in the Application.
4. The Organization/Group agrees that the group will abide by these Rules, Terms & Conditions, and any additional instructions of the camp Ranger and/or a Council-designated camp/local council management team member.
5. The Organization/Group agrees to provide at least one adult leader (defined as 21 years of age or older) for every ten (10) members of its group below the age of 21 years; at least one of the said leaders must always be present with the group while at the facilities or in camp.
6. While Scouting makes every effort to accommodate all persons with disabilities, Scouting America is a charitable, private organization not subject to the ADA. Any group who uses the facilities or camps is responsible for ADA compliance and any accommodation necessary for its participants and attendees.
7. All activities should be conducted on a smoke-free basis. Smoking or tobacco use in any part of the Council facilities and/or camp is prohibited, including controlled substances and/or illegal drugs are not permitted at any Council facility or camp property. This includes the use of electronic cigarettes, personal vaporizers, or electronic nicotine delivery systems that simulate tobacco smoking.
8. This application does not permit use of any machine, apparatus, equipment, or tools owned by the Council except as specified in the Application.
9. Organization/Group shall confer with the appropriate Council staff to obtain permission to bring materials to rented spaces. The council assumes no responsibility for damage to personal property.
10. All laws, rules/ regulations regarding public assemblies must be strictly followed.
11. The Organization/Group shall make no alterations to and shall keep all facilities, spaces, and/or other Council property in good repair. All facilities, spaces, and/or other Council property used by the Organization/Group will be examined after use, and the Organization/Group agrees to leave same in clean condition, and promptly make good for any loss or damage occurring during use of said area, normal wear and tear excepted. If there is any reason to believe that the use may involve damage beyond that of ordinary wear and tear, the Organization/Group is required to pay the Council for such damage.
12. Any decorations, or equipment of the Organization/Group must be promptly removed after use so as not to interfere with the Scout or other activities. If there is a delay, the removal will be made by the Council at the expense of the Organization/Group.
13. On expiration of the time of use identified in the Application, the Organization/Group shall vacate all facilities, spaces, and other Council property and return the same to the Council.

I, \_\_\_\_\_, hereby acknowledge that I am the authorized agent and responsible party responsible for the use Organization/Group. I further acknowledge that I have reviewed and understand the rules and regulations contained herein and agree to comply with all. I understand that failure to comply with the aforementioned rules will jeopardize the Organization/Group's future opportunities to use the local council facilities and/or camps.

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Signature of the Organization/Group's Responsible Party

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Date

---

Print Name

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Responsible Party's Position/Job Title

# RELEASE AND WAIVER OF LIABILITY

The individual named below, the organization/group named below, and each participating person in said organization/group (“We” or “us”) desire to enter and use the real property owned by Great Rivers Council, known as the Scouting Adventure Center, located at 6081 West Van Horn Tavern Road, Columbia, MO 65203. In consideration of being permitted by the Owner to enter and use the Property, and in recognition of the Owner’s reliance hereon, I, for myself, as authorized agent of the organization/group, and as attorney-in-fact for each participating person in said organization/group agree to the following terms and conditions:

1. WE ARE AWARE AND UNDERSTAND THAT ACCESSING THE PROPERTY MAY INVOLVE THE RISK OF SERIOUS INJURY, DISABILITY, DEATH, AND/OR PROPERTY DAMAGE. WE ACKNOWLEDGE THAT ANY INJURIES THAT ANY OF US SUSTAIN MAY RESULT FROM OR BE COMPOUNDED BY THE ACTIONS, OMISSIONS, OR NEGLIGENCE OF THE OWNER, INCLUDING NEGLIGENT EMERGENCY RESPONSE OR RESCUE OPERATIONS OF THE OWNER. NOTWITHSTANDING THE RISK, WE ACKNOWLEDGE THAT WE ARE VOLUNTARILY ACCESSING THE PROPERTY WITH KNOWLEDGE OF THE DANGER INVOLVED AND HEREBY AGREE TO ACCEPT AND ASSUME ANY AND ALL RISKS OF INJURY, DISABILITY, DEATH, AND/OR PROPERTY DAMAGE ARISING THEREFROM, WHETHER CAUSED BY THE ORDINARY NEGLIGENCE OF THE OWNER OR ANY RELEASEE OR OTHERWISE.

2. We hereby expressly waive and release any and all claims, now or hereafter known, against the Owner, Great Rivers Council, Scouting America, and their respective officers, directors, employees, agents, affiliates, successors, and assigns (collectively, “Releasees”), on account of injury, disability, death, or property damage arising out of or attributable to our being on or using the Property, whether arising out of the ordinary negligence of the Owner or any Releasees or otherwise. We covenant not to make or bring any such claim against the Owner or any other Releasee, and forever release and discharge the Owner and all other Releasees from liability under such claims.

3. We shall defend, indemnify, and hold harmless the Owner and all other Releasees against any and all losses, damages, liabilities, deficiencies, claims, actions, judgments, settlements, interest, awards, penalties, fines, costs, or expenses of whatever kind, including attorney fees, the costs of enforcing any right to indemnification hereunder, and the cost of pursuing any insurance providers, incurred by the Owner or any other Releasees arising out of or resulting from any claim of a third party related to our being on the Property.

4. We have read, understand, and agree to comply with those certain Rules, Terms & Conditions for Non-Scout Group Use of Scout Camps/Facilities that have been provided to us. We agree that we will follow all instructions of any onsite property manager or other representative or agent of the Owner while on the Property.

5. If any term or provision of this Release is invalid, illegal, or unenforceable, such invalidity, illegality, or unenforceability shall not affect any other term or provision herein.

**BY SIGNING, I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD ALL OF THE TERMS OF THIS RELEASE AND THAT I AM VOLUNTARILY GIVING UP SUBSTANTIAL LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE BSA.**

**SIGNED:**

---

**INDIVIDUAL NAME:**

---

**ORGANIZATION/GROUP NAME:**

---

**DATE:**

---



# Sample Certificate of Insurance



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
JUNE 2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Marsh & McLennan Agency, LLC company Walnut Hill Lane, Dallas TX 71234	<b>CONTACT NAME</b> PHONE (A/C, No, Ext): XXX-770-XXXX FAX: XXX-770-XXXX E-MAIL ADDRESS:																				
	<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A</td> <td>Insurance Company</td> <td>24147</td> </tr> <tr> <td>INSURER B</td> <td>Insurance Company</td> <td>24147</td> </tr> <tr> <td>INSURER C</td> <td></td> <td></td> </tr> <tr> <td>INSURER D</td> <td></td> <td></td> </tr> <tr> <td>INSURER E</td> <td></td> <td></td> </tr> <tr> <td>INSURER F</td> <td></td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A	Insurance Company	24147	INSURER B	Insurance Company	24147	INSURER C			INSURER D			INSURER E			INSURER F	
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INSURER B	Insurance Company	24147																			
INSURER C																					
INSURER D																					
INSURER E																					
INSURER F																					
<b>INSURED</b> XYZ Youth School 123 Main St Anytown USA 12345																					

COVERAGES

CERTIFICATE NUMBER: 1341964543

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INBR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	<input checked="" type="checkbox"/> COMMERCIAL GEN'L LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY PROJECT LOC OTHER:			ABCD312833	3/1/2023	3/1/2024	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMPIOP AGG \$ OTHER: \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULE D AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ OTHER: \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB DED RETENTION \$			DCBA312832	3/1/2023	3/1/2024	EACH OCCURRENCE \$1,000,000 AGGREGATE \$2,000,000 OTHER: \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N	N/A			PER STATUTE OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

National council and all local councils are named as an additional insured for our rental of facilities of the Great Rivers Council for June 1 through June 12, 20xx.

This insurance is primary and non-contributory. Waiver of Subrogation is included in favor of the certificate holder.

CERTIFICATE HOLDER

CANCELLATION

Great Rivers Council, Scouting America 6081 W Van Horn Tavern Road Columbia, MO 65203	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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ACORD 25 (2014/01)

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# Activity Consent Form

## ACTIVITY CONSENT FORM AND APPROVAL BY PARENTS OR LEGAL GUARDIAN FORMULARIO DE CONSENTIMIENTO Y APROBACIÓN DE ACTIVIDAD POR PARTE DE LOS PADRES DE FAMILIA O TUTORES

The recommended use of this form is for the consent and approval for Cub Scouts, Boy Scouts, Varsity Scouts, Venturers, and guests to participate in a trip, expedition, or activity. It is required for use with flying plans.

El uso recomendado de este formulario es para obtener el consentimiento y aprobación para Cub Scouts, Boy Scouts, Varsity Scouts, Venturers, e invitados para participar en un viaje, expedición o actividad. Es obligatorio para su uso con planes de vuelo.

<input type="text"/>	<input type="text"/>	<input type="text"/>
First name of participant Nombre del participante	Middle initial Inicial del segundo nombre	Last name Apellido
Birth date (month/day/year) Fecha de nacimiento (mes/día/año) <input type="text"/> / <input type="text"/> / <input type="text"/>		Age during activity Edad al momento de realizar la actividad <input type="text"/>

Address  
Domicilio

City Ciudad <input type="text"/>	State Estado <input type="text"/>	Zip Código postal <input type="text"/>
-------------------------------------	--------------------------------------	---

Has approval to participate in (name of activity, orientation flight, outing trip, etc.)  From  to   
 Tiene la aprobación para participar en (nombre de la actividad, vuelo de orientación, excursión, etc.) De (Date) (fecha) a (Date) (fecha)

### INFORMED CONSENT, RELEASE AGREEMENT, AND AUTHORIZATION

### CONSENTIMIENTO INFORMADO, CONVENIO DE EXONERACIÓN Y AUTORIZACIÓN

I understand that participation in Scouting activities involves the risk of personal injury, including death, due to the physical, mental, and emotional challenges in the activities offered. Information about those activities may be obtained from the venue, activity coordinators, or local council. I also understand that participation in these activities is entirely voluntary and requires participants to follow instructions and abide by all applicable rules and the standards of conduct.

Entiendo que la participación en actividades Scouting implica el riesgo de lesiones personales, incluyendo la muerte, debido a los retos físicos, mentales y emocionales en las actividades que se ofrecen. Se puede obtener información sobre dichas actividades en la sede, con los coordinadores de la actividad o al concilio local. También entiendo que la participación en estas actividades es totalmente voluntaria y requiere que los participantes sigan instrucciones y acaten todas las reglas y normas de conducta pertinentes.

In case of an emergency involving my child, I understand that efforts will be made to contact me. In the event I cannot be reached, permission is hereby given to the medical provider to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for the adult in charge and/or any physician or health care provider involved in providing medical care to the participant. Protected Health Information/Confidential Health Information (PHI/CHI) under the Standards for Privacy of Individually Identifiable Health Information, 45 C.F.R. 95160.103, 164.501, etc. seq., as amended from time to time, includes examination findings, test results, and treatment provided for purposes of medical evaluation of the participant, follow-up and communication with the participant's parents or guardian, and/or determination of the participant's ability to continue in the program activities.

En caso de que mi hijo se vea involucrado en una emergencia, entiendo que se realizarán esfuerzos para contactarme. En caso de que yo no pueda ser localizado, por este medio otorgo permiso al proveedor de servicios médicos para garantizar el tratamiento adecuado, incluyendo hospitalización, anestesia, cirugía o inyecciones de medicamentos para mi hijo. Los proveedores de servicios médicos están autorizados a revelar información médica protegida al adulto a cargo, médico o proveedor de servicios médicos involucrado en la prestación de atención médica para el participante. La información de salud protegida/información médica confidencial (PHI/CHI, por sus siglas en inglés) bajo los Estándares de privacidad de información médica individualmente identificable, 45 C.F.R. 95160.103, 164.501, etc., y siguientes, como se enmiendan de vez en cuando, incluyen resultados de reconocimientos médicos, resultados de pruebas y el tratamiento proporcionado para fines de evaluación médica del participante, seguimiento y comunicación con los padres o tutor legal del participante, o determinación de la capacidad del participante para continuar en las actividades del programa.

With appreciation of the dangers and risks associated with programs and activities including preparations for and transportation to and from the activity, on my own behalf and/or on behalf of my child, I hereby fully and completely release and waive any and all claims for personal injury, death, or loss that may arise against the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with any program or activity.

Con reconocimiento de los peligros y riesgos asociados con los programas y actividades incluyendo preparativos y transportación hacia y desde la actividad, en mi propio nombre o en nombre de mi hijo, por este conducto eximo total y completamente, y renuncio a cualesquiera y toda reclamación por lesiones personales, muerte o pérdidas que puedan surgir a la organización Boy Scouts of America, el concilio local, los coordinadores de la actividad y todos los empleados, voluntarios, grupos involucrados, u otras organizaciones asociadas con cualquier programa o actividad.

NOTE: The Boy Scouts of America and local councils cannot continually monitor compliance of program participants or any limitations imposed upon them by parents or medical providers. List any restrictions imposed on a child participant in connection with programs or activities below and counsel your child to comply with those restrictions.

NOTA: La organización Boy Scouts of America y los concilios locales no pueden vigilar continuamente el cumplimiento de los participantes del programa o cualquier limitación impuesta sobre ellos por los padres o proveedores de servicios médicos. Enumerar más abajo las restricciones impuestas a un niño participante en relación con los programas o actividades.

List participant restrictions, if any:   
 None

Restricciones del participante, si existen:   
 Ninguna

<input type="text"/>	<input type="text"/>
Participant's signature Firma del participante	Date Fecha

<input type="text"/>	<input type="text"/>
Parent/guardian printed name Nombre con letra de molde del padre de familia/tutor	Date Fecha

Area code and telephone number (best contact and emergency contact) Código de área y número telefónico (primer contacto y contacto de emergencia) <input type="text"/>	Email (for use in sharing more details about the trip or activity) Correo electrónico (para informar más detalles sobre el viaje o actividad) <input type="text"/>
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Contact the adult leader with any questions:  
 Póngase en contacto con el líder adulto si es que tiene preguntas:

Name Nombre <input type="text"/>	Phone Teléfono <input type="text"/>	Email Correo electrónico <input type="text"/>
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BOY SCOUTS OF AMERICA®

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2014 Printing

# Pricing Guide - Scouting Adventure Center

## Pricing Guide Summary

### *PROGRAM CENTER PACKAGE*

\$100 for 5 hours for Scout Groups, \$200 for 5 hours for non-scout groups

### *PROGRAM AREA*

\$25 each hour (minimum of 4 hours required for non-scout groups)

### *SINQUEFIELD INNOVATION SPACE*

\$25 each hour (minimum of 4 hours required for non-scout groups)

### *THE TRAINING ROOM*

\$26 for the first four hours, and \$6.50 for each hour after.

### *THE VETERANS UNITED FOUNDATION CLIMBING WALL PACKAGE*

\$50 for the space rental and an additional fee of \$15 per climber for every 2 hours on the climbing wall (minimum of 7 climbers is required for individual reservations). Climbing Wall fee includes shoe, harness, and helmet rental for the duration of the climbing event.

### *INFLATABLE PROJECTOR SCREEN AND PROJECTOR*

\$25 per day

### *INFLATABLE ARCHERY RANGE* (Requires Scouting America trained Rangemaster)

Free for Great Rivers Counsel Scout Units (in Council Use Only)

### *INFLATABLE BB RANGE* (Requires Scouting America trained Rangemaster)

Free for Great Rivers Counsel Scout Units (in Council Use Only)

### *GENERATOR*

Free for scout groups

\$25 per day for non-scout groups (Does not include fuel)

### *CANOES* (Requires BSA Safety Afloat trained leader)

Free for Great Rivers Counsel Scout Units (in Council Use Only)

For Reservations visit <https://campreservation.com/653/Camps/971>

# Facility and Equipment Descriptions and Amenities

## *Program Center Package*

The 6,000 square foot Scouting Adventure Center Program Center Package consists of three Program Spaces, **The Program Area**, **Sinquefield Innovation Space**, and the **Training Room**. These Spaces also contain the **Veterans United Foundation Climbing Wall**, however the climbing wall must be reserved separately. Please refer to each program area for the different amenities.

Pricing: \$100 for 5 hours for Scout Groups, \$200 for 5 hours for non-scout groups

## *Program Area*

The 3,000 square foot Scouting Adventure Center Program Area is the area between the Sinquefield Innovation Space and the Veterans United Foundation Climbing Wall. The Program Area does NOT include access to the Sinquefield Innovation Space nor Veterans United Foundation Climbing Wall.

The Program Area offers seating for up to 110 individuals.

- 15 Round Tables with up to 5 per table
- 110 individuals in an auditorium set-up
- 15 Rectangle Tables with up to 6 per table.
- All the tables and chairs may be cleared out for other activities.

Pricing: \$25 each hour (minimum of 4 hours required for non-scout groups)

## *Sinquefield Innovation Space*

The 2,000 square foot Innovation Space features 4 unique program areas, each with a different focus:

1. **Audio, Visual, and Design:** this unique area focuses on photography, moviemaking, animation, and other design processes such as art, sculpture, model building, and more! Youth and adults will engage in traditional design activities but also get to you cutting edge equipment such as 3D printers and printing software, the latest graphic design software, and more!
2. **Engineering and Programming:** this unique program area focuses on teaching youth and adults about the basics of engineering, electricity, electronics, computers, coding, and more! Activities in this area will range from teaching basic engineering principles to learning how to solder a circuit board, to building robots, and more!
3. **Health and Safety:** what of the most important skills someone can learn is how to take care of themselves and others when they get injured or are in an emergency. This area focuses on those basic skills such as First Aid, CPR, AED, Wilderness First Aid, Fire Safety, Healthcare Professions, and more!
4. **Science and Nature:** this area is focused on teaching and connecting youth and adults with the scientific principles that surround us. This is one of most broad areas. Youth and adults will learn about Chemistry, Nuclear Science, Bird Studies, Insect Studies, Reptile & Amphibian Studies, and more!

The Sinquefield Innovation Space offers seating for up to 60 individuals with an adjustable table/ chair arrangement system to fit the needs of a group.

- 15 static desktops and 15 mobile desktops.
- 4 mobile science lab tables with stools
- 2 large mobile worktables seating up to 8
- 7 Square tables seating up to 4
- Multiple additional workstations
- Equipment highlights: cameras, green screen, 3D Printers, microscopes, telescopes, drones & more.

Pricing: \$25 each hour (minimum of 4 hours required for non-scout groups)

## *The Training Room*

The Training Room offers seating for up to 20 Individuals

Amenities:

- Air Conditioning
- Coffee and Beverage Area
- Corporate Training Seating
- Electric
- Gas Heat
- High Speed, Wireless Internet
- Microwave
- Refrigerator
- Restroom access
- Water

Pricing: \$26 for the first four hours, and \$6.50 for each hour after.

## *The Veterans United Foundation Climbing Wall Package*

The Scouting Adventure Center is proud to be one of just two facilities in the Columbia area that have access to a full-scale, indoor climbing wall. The wall is 26 ft high and approximately 40 ft wide. The highest point of the wall is Hilliard's Peak! With multiple lanes of varying difficulty, we cater to every level from beginner to the avid climber. Designed specifically for all ages and skill ranges. The Climbing wall package includes both the wall and the Program Area.

The Climbing Wall offers climbing for up to 30 Individuals.

- 14 lanes of varying difficulty
- 6 automatic belay and 8 traditional belay systems
- Requires scheduling trained staff

Pricing: \$50 for the space rental and an additional fee of \$15 per climber for every 2 hours on the climbing wall (minimum of 7 climbers is required for individual reservations). Climbing Wall fee includes shoe, harness, and helmet rental for the duration of the climbing event.

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