## Instructions:

- 1. Print out this sheet. If your printer has print quality settings, select 'BEST'.
- Fill in Name, Address, City, State, Zip. Be neat as possible and use your best BLOCK STYLE PRINT. No script please. If your best print requires the use of a psychic to read, start over and DO YOUR BEST.
- 3. Check that your survival kit has ALL of the items listed on the contents side. The first column is a listing of the items supplied to you by the Troop. The second column is a listing of the items you must supply. There are seven blank spaces for you to list extra items that are in your survival kit. Again, neatness counts. You may improve upon the items supplied by the Troop but you may not omit any of them.
- 4. If you have any allergies or medical conditions that should be known in an emergency, fill out that area.
- 5. Take your survival kit and this form to your Patrol Leader for him to verify the contents and sign. Patrol Leaders, go to the SPL for approval and signature for your kits. Remember to check off the 'Meets' or 'Surpasses' box.
- 6. Bring the completed form to Assistant Scoutmaster Shannon. He will take your picture. You must be in full Class A uniform. This form will have your picture added to it and reduced in size by one half. Your laminated card will be returned to you at the next regular Troop meeting.

BSA Troop 204 Certified Survival Kit		
(Name)	OTO VALUES STRONGLERO DE LES	
	C YE WAY	Scout
(Address)	TAPACTER COUR	Photo
(City State	Zip	
Home Phone This Survival Kit ☐ Meets Surpasses	Troop 204 Standards	PL, SPL Signature
Survival Kit Contents Scoutmaster - Ted Vinson Cell Phone (404) 473-8015		
3/4" Plastic Band Aids (3) 2"x 2" Sterile Gauze Pad Adhesive Tape (12") Beef Bouillon Cubes (2) Compass, small Fishing Kit Line, 20' Hooks (2) Sinkers (2) Crappie Jig Morse & Semaphore Card Parachute Cord (18') Razor Blade, Single Edge	Aluminum Foil (2) 12"x 12" sheets Emergency Quarters Fire Starter in Zip Loc List of Contents (this card) Matches (6) Match Striker Paper Pencil or Pen Water Purifying Tablets (dated) Waterproof Container	Allergies or Medical Conditions

This Form will be reduced 50%