



Aviation Explorer Base Camp

INDIVIDUAL REGISTRATION FORM

Unit (Post/Crew) Number		Unit City/State	
Age on Date of Arrival at AEB		Male or Female	T-Shirt Size
First Name	Last Name		Birth Date
Street Address		City	
State	Zip	eMail	
Parent/Guardian Names			
Parent/Guardian Phones			
Registrant's Phone (if different from parents)			

Forms Checklist for all Youth and Adult Attendees

~ Submit the following to your Advisor by May 15th ~

- | Your Initials | Advisor Initials | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Individual Registration Form completed in full |
| <input type="checkbox"/> | <input type="checkbox"/> | Additional Information Form completed in full |
| <input type="checkbox"/> | <input type="checkbox"/> | BSA Personal Health and Medical Record Form - Class 3 completed and signed by personal physician |
| <input type="checkbox"/> | <input type="checkbox"/> | Explorer Base Health Care Form completed in full including necessary signatures |
| <input type="checkbox"/> | <input type="checkbox"/> | Personal Agreement Form with necessary signatures |
| <input type="checkbox"/> | <input type="checkbox"/> | EAA Volunteer/Work Consent Form with parental signature for youth 18 or under |
| <input type="checkbox"/> | <input type="checkbox"/> | PhotoCopy of current proof of insurance (i.e. parent's insurance card with name of youth indicating coverage) |
| <input type="checkbox"/> | <input type="checkbox"/> | Payment for balance of fees |



Additional Information

Required for Scheduling and Meal Preparation

AirVenture, EAA's annual convention, runs from Monday to Sunday each year. Our Aviation Explorer Base Camp begins the Saturday before the convention and runs for one week, from Saturday to Saturday. The first meal at camp is served the opening Saturday evening before the orientation and safety training. The last meal is served the last Saturday evening.

Name	Unit Number:
<i>Including the upcoming session, number of years you have attended AEB:</i>	
<i>Special Dietary Concerns:</i>	
<i>Do you have special skills or training to consider when tasks are assigned?</i>	

Arrival and Departure Information

**Accurate information is necessary for scheduling and meal planning.
Notify camp (explorerbase@wi.rr.com) of changes in
arrival or departure information**

*Arrival Date
and Time:*

*Departure Date
and Time:*

Point Training

Point Trainee Requirements:

- *Receipt of the Learning for Life Aviation Career Achievement Award*
- *18 years of age or older*
- *Two prior years of attendance at the Aviation Explorer Base Camp*

Have you received the LFL Aviation Career Achievement Award?

Are you AEB 'Point Qualified' to direct aircraft on your own?

If not, would you like to be considered for Point training?

Have you received some Point training?



Personal Agreement Form

This form is for everyone who registers.

1. You must be a member in good standing in your Unit for a period of four (4) months prior to departure date. This requirement may be waived only with agreement of the Unit Leader.
2. You must complete and have your parent or guardian sign all forms listed in the Main Packet. Return them to your Unit Leader before the registration deadline.
3. Individuals with any disability, which could limit or prevent them from performing the assigned volunteer tasks of the contingent, must have a written doctor's statement describing the disability and the limits of their activity. These individuals should be made known to the Explorer Base Chairman prior to that individual's arrival at the Convention.
4. You must attend with your parent(s)/guardian(s) the Parent/Explorer Orientation meeting scheduled prior to the convention. Check with your Unit Leader for date and time.
5. You must have all fees paid by the registration deadlines.
6. You must attend the scheduled Flight Line/ Aircraft Safety Orientation upon arrival at camp – see advisor for details.

PARTICIPANT AGREEMENT FOR BOTH YOUTH AND ADULTS

I understand that if I am responsible for endangering or injuring myself or others by my carelessness or misconduct, responsible for damage to EAA property or other persons property, or not adhering to the rules and conditions of my participation, that I will be sent home immediately at my or my parent's/ guardian's expense.

I promise to live by the Explorer Code at all times.

I will volunteer each day as scheduled.

I will live up to the Rules and Policies of the Aviation Explorer Base Camp.

I have read, comply with and agree to meet all of the conditions required for my participation in this activity.

Participant's Name (please print)

Participant's Signature

Date

PARENT/GUARDIAN AGREEMENT (pertains to all Explorers ages 14-20)

I have attended the Parent/Explorer orientation with my son/daughter and fully understand their activities and involvement with the EAA and the EAA Convention and Fly-In as a volunteer for that organization

I have read the conditions governing the participation of my son/daughter in this event and am satisfied he/she understands them and that they agree to abide by them during their stay.

I further understand that if my son/daughter is responsible for injury to themselves or to others either by misconduct or carelessness, or responsible for the damage to EAA property or the property of others or does not adhere to all the agreed upon rules that he/she will be sent home immediately AT MY EXPENSE.

Parent/Guardian Name (please print)

Parent/Guardian's Signature

Date

**GUIDELINES FOR MINOR VOLUNTEERS
EXPERIMENTAL AIRCRAFT ASSOCIATION
(ACCORDING TO WISCONSIN'S CHILD LABOR LAW)**

Youth 14 to 18 years of age can participate with written parental consent but must adhere to the following conditions.

Minors under 16 years of age:

- Cannot work on or near a landing strip, taxiway or maintenance apron
- Cannot operate (or assist in the operation of) any type of power driven machinery (this includes any lawn and garden equipment, meat slicing machine and the like).
- Cannot operate any power tools.
- Cannot work in construction including demolition and repair.
- Cannot operate or tend hoisting equipment.

Minors 16-18 years of age:

- Cannot use power lawn equipment, power tools or drive a tractor.
- Cannot drive as part of their employment even if the driving is incidental, sporadic or occasional. Cannot be outside helper on a motor vehicle.
- Cannot operate meat slicing machinery or power-driven bakery machines.
- Cannot operate power-driven hoisting equipment.
- Cannot operate power-driven circular saw, band saws, and guillotine shears

Hours and time of day minors may work:

MAXIMUM HOURS TO WORK/VOLUNTEER:

		<u>14 & 15</u>	<u>16 & 17</u>
Daily:	Day during non-school week	8 hours	Unlimited
Weekly:	Non-school week	40 hours	50 hours

PERMITTED TIME OF DAY:

	<u>14 and 15</u>	<u>16 and 17</u>
Day during non-school week	7:00 a.m. to 11:00 p.m.	<i>Unlimited</i>

**EAA
YOUTH VOLUNTEER/WORK CONSENT FORM**

I am the natural parent or legal guardian of the child whose full legal name is listed below. In that capacity, I hereby consent to such child serving as a volunteer worker for EAA from _____ to _____. He/she may perform such duties, as the organization shall determine subject to the guidelines shown above.

Child's Name (Please print)

Signature of Parent/Legal Guardian

Printed name of Parent/Legal Guardian

Return form with Aviation Explorer Base Camp Registration Form. Camp staff will submit copy of form to EAA.

Aviation Explorer Base Health Care Form

Fill out completely, for your own safety.

Name: _____

Age: _____ Post/City: _____

Emergency Contact Information

Name: _____ Relationship: _____

Telephone: _____ Alternate Number: _____

Name: _____ Relationship: _____

Telephone: _____ Alternate Number: _____

Personal physician: _____ Telephone: _____

Allergies

and

Reactions

_____	_____
_____	_____
_____	_____

Restrictions (diet and/or activity): _____

Date of Last Tetanus (if over 10 years, update when you see your doctor): _____

Medications

Dose

Medical Condition

_____	_____	_____
_____	_____	_____
_____	_____	_____

YOUTH PARTICIPANTS (under 18 years of age) must have this form signed by a parent or guardian.
ADULT PARTICIPANTS must sign:

I give my permission for the full participation of [my child / myself] in the Aviation Explorer Base program. In case of emergency, I understand every effort will be made to contact me or my designated contact person. In the event I cannot be reached, I give my permission to a licensed healthcare practitioner selected by the adult in charge to obtain medical information and secure medical treatment, including hospitalization, anesthesia, surgery, or injections of medication for [my child / myself].

Medications available at camp that may be administered include: Tylenol, Ibuprofen, Benadryl, antibiotic ointments, aspirin, 1/2% hydrocortison cream, betadine ointment.

Signature: _____ Date: _____