

Introduction to Outdoor Leader Skills (IOLS)



The Samoset Council invites you to participate in **Introduction to Outdoor Leader Skills (IOLS)**, a hands-on course on how to do all those outdoor skills and planning for great youth-led camping adventures. This course is needed to help complete your "Trained Leader" requirements and is designed for all Scoutmasters, Assistant Scoutmasters, Troop Committee Members, Arrow of Light Leaders and any registered adult scouter wanting to brush up on their outdoor teaching skills.

WHO: Scoutmasters, Assistant Scoutmasters, Committee Members & AOL Den Leaders
WHEN: May 14-15, 2021 (Friday night and Saturday)
WHERE: Phillips Scout Camp, 3511 Camp Phillips Road, Weston, WI.
WHY: It is required training for Scoutmasters and Assistant Scoutmasters. **It's FUN!**

TIME: 5:00 PM Friday to 6:00PM Saturday (Check-In Time: 5:00pm. PLEASE be prompt!)
FEE: \$25.00 by May 7, 2021

LATE FEE: \$30.00 after May 7, 2021 (Registrations accepted on the Day of Event)

WHAT TO BRING: Scouts BSA Handbook, tent, sleeping gear, toiletries, mess kit, paper & pencil, clothes for the weather. Field uniforms are encouraged. A complete list will be provided to participants once registered.

REGISTRATION: Online or use the form below by May 7, 2021 for discount. Please use the form below if you have health or diet restrictions.

CONTACT E-MAIL: dalemorhouse64@gmail.com

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**REGISTER ONLINE AT:** [www.samoset.org/camping/event-registration](http://www.samoset.org/camping/event-registration) OR [www.samoset.org/training](http://www.samoset.org/training)

**Mail to:** Outdoor Leader Skills \* Samoset Council, BSA 3511 Camp Phillips Road, Weston WI 54476 \*

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Position in Scouting \_\_\_\_\_ Troop or Pack # \_\_\_\_\_

Email Address: \_\_\_\_\_

We will be camping for 1 night in patrols just as the youth will be. Tent camping is preferred. Tents are available should you need one.

Sleeping in Tent (Yes/No) \_\_\_\_\_

I need a tent (Yes/No): \_\_\_\_\_

Cabin (health reasons): \_\_\_\_\_ CPAP \_\_\_\_\_

Do you have any allergies or dietary restrictions? \_\_\_\_\_

Do you have any health restrictions? \_\_\_\_\_