

Instructions for completing BSA form 4419 in Adobe PDF.

This formatted form was created from an original BSA form 4419 and formatted by John Morton. From this page you may hit the TAB key to advance to the first field on the form. You can then enter the date, then TAB to the next field, etc... Some fields for Lincoln Heritage Council users have been pre-populated. If you are using this in another council, enter the proper information for your council. All attempts have been made to ensure that all fields are formatted for the proper type data. When entering information please observe the following formats.

- ❑ Enter all dates with month / day / and year. (Example: 02/05/2005)
- ❑ Enter phone numbers with area codes. Do not use parentheses or dashes. (Example: 5025551212)
- ❑ ZIP codes are entered as five digits only. Do not use ZIP+4
- ❑ Enter insurance coverage with digits only, no dollar signs, commas, or decimals. (Example: enter 250000 for \$250,000)
- ❑ Some information that is repeated is automatically entered after the first entry. (Example: The council name is required several places. After you enter it the first time it will be entered in subsequent fields requiring that same entry.)
- ❑ To navigate from field to field, use the TAB key.
- ❑ Remember to sign forms where required

The blank form that follows this page is approved by BSA and can be found on several official BSA web sites. The formatting that I have done has not been officially approved. If you use this form and have any problems entering the appropriate information, leave that field blank. After you print the form you can fill in the proper information with pen or pencil.

If you use this form often you can enter the information that you will use every time you use the form, save it, and then edit it the next time you need it. Just make sure that you correct all information before printing the new form.

NATIONAL TOUR PERMIT APPLICATION

LOCAL COUNCIL TIME STAMP	REGIONAL TIME STAMP
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A National Tour Permit is required for all groups traveling to areas 500 miles or more one way from home area (local council camp excepted), or crossing national boundaries into the territory of other nations. This application should be submitted, typed or printed, to the local council service center for approval **at least one month before your tour. Then the council service center will forward it to the regional service center for further approval.** It is essential that you read *Tours and Expeditions*, No. 33737C, before filling out this form. For trips and overnight camps less than 500 miles one way, use Local Tour Permit Application, No. 34426B.

FOR TOURS 500 MILES OR MORE AND TOURS OUTSIDE THE U.S.A.

Current date _____

Council name _____ Type of unit _____ No. _____

Council address _____

Purpose of this trip is _____

From (city and state) _____ to _____

Mileage round trip _____ Dates / / to / / Total days _____

Is accident insurance in force for this unit? Yes No Company _____ Policy no. _____

LEADERSHIP AND PERSONNEL (Boy Scouts of America policy requires at least two adult leaders on all camping trips and tours. Coed Venturing crews must have both male and female leadership.)

1. The adult leader in charge of this group must be at least 21 years old.

Name _____ Age _____ Scouting position _____ Expiration date _____

Street or R.F.D. _____

City _____ State _____ Zip code _____

Home phone () _____ Business phone () _____

List experience and training for this responsibility. _____

I have in my possession a copy of *Guide to Safe Scouting*, No. 34416B, and have read it. _____

Adult leader's signature

2. Associate adult leader name(s) (minimum age 18) Age Scouting position Expiration date

Address _____ Phone () _____

Address _____ Phone () _____

Attach a list with additional names and information as outlined above.

3. Party will consist of (number):

- _____ Cub Scouts
- _____ Boy Scouts
- _____ Varsity Scouts
- _____ Venturers—male
- _____ Venturers—female
- _____ Adults—male
- _____ Adults—female
- _____ Total

4. Party will travel by:

- Car
- Bus
- Train
- Plane
- Canoe
- Van
- Boat
- Foot
- Cycle

If traveling by other methods, please specify:

_____ Party will travel with another crew that has a male or female (circle one) leader. This leader will be responsible for the Venturer(s) of my crew.

Advisor _____

Other crew's no. _____

Council _____

TRANSPORTATION

5. You will enforce reasonable travel speed in accordance with state and local laws in all motor vehicles.

6. If traveling by motor vehicle:

- a. *Driver qualifications:* All drivers must have a valid driver's license that has not been suspended or revoked for any reason, and must be at least 18 years of age. **Youth-member exception:** When traveling to an area, regional, or national Boy Scout activity, or any Venturing event under the leadership of an adult (21+) tour leader, a youth member at least 16 years of age may be a driver, subject to the following conditions: (1) Six months' driving experience as a licensed driver (time on a learner's permit or equivalent is not to be counted); (2) No record of accidents or moving violations; (3) Parental permission has been granted to leader, driver, and riders.

NATIONAL TOUR PERMIT

THIS IS TO CERTIFY THAT

COUNCIL NUMBER _____

Permission is granted to:

Tour leader _____ Date issued _____

Type of unit _____ No. _____ Council _____

Council address _____

For trip from _____ to _____

Dates _____ to _____, 20_____

This permit is granted with the understanding that the group is prepared to meet its own expenses and that no soliciting of funds or of special concessions because of its connection with the Boy Scouts of America will be permitted en route.

Any person to whom this permit is presented is advised that proper assurance has been given to approved representatives of the Boy Scouts of America that members of this group are qualified campers and are familiar with the standards and objectives of good Scouting and will conduct themselves accordingly.

- b. If the vehicle to be used is designed to carry more than 15 persons (including driver), the driver must have a commercial driver's license (CDL).
Name _____ CDL expiration date _____
- c. Driving time is limited to a maximum of 10 hours and must be interrupted by frequent rest, food, and recreation stops. If only one driver, then reduce driving time and stop more frequently.
- d. Seat belts are provided, *and must be used*, by all passengers and driver. Exception: A school or commercial bus, where not required by law.
- e. Passengers will ride only in the cab if trucks are used.

INSURANCE

All vehicles MUST be covered by a public liability and property damage liability insurance policy. The amount of this coverage must meet or exceed the insurance requirement of the state in which the vehicle is licensed. (It is recommended, however, that coverage limits are at least \$50,000/\$100,000/\$50,000 or \$100,000 combined single limit.) Any vehicle carrying 10 or more passengers is *required* to have limits of \$100,000/\$500,000/\$100,000 or \$500,000 combined single limit. In the case of rented vehicles, the requirement of coverage limits can be met by combining the limits of personal coverage carried by the driver with coverage carried by the owner of the rented vehicle. All vehicles used in travel outside the United States must carry a public liability and property damage liability insurance policy that complies with or exceeds the requirements of that country. Attach an additional page if more space is required.

KIND YEAR AND MAKE OF VEHICLE	NUMBER OF PASSENGERS	OWNER'S NAME	DRIVER'S LICENSE NUMBER*	DOES EVERYONE HAVE SEAT BELTS?	PUBLIC LIABILITY INSURANCE COVERAGE		
					PUBLIC LIABILITY		PROPERTY DAMAGE
					Each Person	Each Accident	
					\$	\$	\$

*All drivers must have a valid driver's license that has not been suspended or revoked for any reason.

- 7. If traveling by public carrier, plane, or boat:
 - a. Operations are in accord with state and federal laws.
 - b. Insurance coverage is adequate.

HEALTH—SAFETY—AQUATICS—CLIMBING/RAPPELING—SANITATION—WILDERNESS USE POLICY—YOUTH PROTECTION TRAINING

- 8. a. Where swimming or boating is included in the program, Safe Swim Defense, No. 34370A, and/or Safety Afloat, No. 34368B, standards are to be followed. If climbing/rappelling is included, then Climb On Safely, No. 3206 (which recommends the American Red Cross's standard first aid and When Help Is Delayed or equivalent course), must be followed.
One adult in the group must be trained as outlined:

NAME	AGE	SAFE SWIM DEFENSE EXPIRATION DATE	SAFETY AFLOAT EXPIRATION DATE	CLIMB ON SAFELY DATE TAKEN

At least one person must be trained in CPR from any recognized agency for Safety Afloat and Climb On Safely.

NAME	AGE	CPR TRAINING	AGENCY	EXPIRATION DATE

- b. Our travel equipment will include: first-aid kit, road emergency kit.
- c. Units going into the wilderness or backcountry must carry and abide by the Wilderness Use Policy, No. 20-121.
- d. The group leader will have in his or her possession the appropriate health and medical forms for every leader and participant.
- e. All registered adults participating in any nationally conducted event or activity must have completed the BSA Youth Protection Training.
- f. At least one registered adult who has completed BSA Youth Protection Training must be present at all other events and activities that require a tour permit.

Itinerary. It is required that the following information be provided for *each day* of the tour: (Note: Speed or excessive daily mileage increases the possibility of accidents.) Attach an additional page if more space is required.

DATE	From	TRAVEL To	MILEAGE	OVERNIGHT STOPPING PLACE (Check if reservations are cleared.)	✓

THE INTERNATIONAL LETTER OF INTRODUCTION

Individuals wanting an International Letter of Introduction for travel to another country alone or with family members should use the International Letter of Introduction Application, No. 22-128, available from your local council service center. (See "Planning an International Experience" in *Tours and Expeditions*, No. 33737C, for tips on planning international tours.)

We hereby verify that we consider the leadership of this tour adequate in every way, that the foregoing statements are correct, and that we will comply with the policies and procedures for tours and expeditions as established by the Boy Scouts of America. **In the event of any serious injury or fatality occurring during this activity, we will notify our local council immediately.**

Signatures Required:

Approved _____ Unit no. _____ Date _____
(Chairman of committee)

Approved _____
(Tour leader)

Send this entire application to your local council service center for approval at least one month prior to the activity.

Approved _____ Council no. _____ Date _____
(Scout executive)

For Regional Use Only:

Approved by _____ Region W C S NE Date _____

#4419C

