

WASHINGTON CROSSING COUNCIL

COUNCIL AND DISTRICT ACTIVITY

RESOURCE MANUAL

*For use in the planning and implementation of
all Council and District activities*

Updated: April 2019



BOY SCOUTS OF AMERICA
WASHINGTON CROSSING COUNCIL

Thank you for volunteering! Your leadership is instrumental in the development of quality programs for the youth, families, unit leaders, and all volunteers in Washington Crossing Council.

This resource manual will serve as a tool in the planning and implementation of Council and District activities. Outlined throughout, you will find the latest policies as it relates to budget approval, refunds, Ockanickon Scout Reservation usage, and more. It is essential to continue to work hand-in-hand with your District Activities Chairperson and District Executive or Staff Advisor.

Thank you for your willingness to help. Please do not hesitate to let us know how we can best serve you as you prepare for a safe, fun, and exciting program!

George Conley

Council Activities Chairperson

geolive60@aol.com

609-577-7201

Todd Warner

Camping Director

todd.warner@scouting.org

215-348-7205 x318



Planning a Successful Event (an example)

Step 1: Goal Setting – how many Scouts are you preparing for?

Step 2: Logistics – where would you like to have the event?

Step 3: Backdating

Step 4: Budgeting

Step 5: Promotions & Online Registration

Step 6: Recruiting Staff

Step 7: Hold the Event

Step 8: Wrap-up

Task	Timeframe	Complete
Secure Date, Location, Post Calendar/Online	1-2 years	
Recruit Chair	6-12 months	
Recruit Event Team	6-12 months	
Review Preliminary Budget & Adjust (preliminary budgets were built year-prior)	6-12 months	
Online Registration	6-12 months	
Prepare Program	6-9 months	
Prepare Leader & Participant Guide	6-9 months	
Promotions at Roundtable, Email, more	On-going	
Request Cash Advances	3 months as needed	
Prepare Facilities (permits, insurance)	3 months (or when secured)	
Event Team Updates/Meeting	On-going as needed	
Request Purchase Orders	On-going as needed	
Final Facility Walk-through	30 days	
Prepare Signage & Instructions	15-30 days	
Secure Additional Staff Support	On-going	
Pick-up Materials	3-5 days	
Event Setup	1 day	
Event	Day of Event	
Turn-in Money to Staff Advisor	Upon completion	

Calendaring

Each winter the Council builds the calendar for the next 18 months. Use this as an opportunity to map out when you would like to hold your events.

- Consider when you held your event in the past. Is it a good time on the calendar?
- What holidays are scheduled during your event?
- What religious observances take place during your event?
- Does the event interfere with other Council events that youth would participate in?

All activities should not impede or restrict the participation of a Scout, leader, or family due to a religious holiday or observance.

Budgeting

Each August & September the Council builds the operating budget for the upcoming year. During this time, your District or Council Committee will work with event coordinators and staff advisors to develop your preliminary event budget.

- Consider where you would like to host your event and the location fees.
- Consider attendance trends when planning your income and event fees.
- Consider online registration credit card transaction fees. (ie. Individual vs. unit registrations)
- Adjust for annual inflation for food and material expenses.
- Is the event income covering all expenses including credit card processing, event management expenses, and other fees?

As you prepare for your event, your staff advisor will sit with you to review the preliminary budget and discuss any modifications needed for this year's event for both income and expenses.

All modifications to the budget must reflect the same projected profit/loss line as the preliminary budget.

Once the budget modifications receive approval from the event chairperson and the staff advisor, the final event budget will be submitted to the council's Field Director for approval and set up the next steps for event publication.

Online Registration

With your date secured on the calendar, you are almost ready to open your event registration. If your event does not use online registration, we recommend a paper registration form.

1. Review and approve/modify your preliminary budget.
2. Establish your registration deadlines and late fees (if applicable)
3. Establish an event refund policy for cancellations
4. Your staff advisor will submit your budget to the Field Director
5. Your online registration will be available for testing within 72 hours of budget submission.
6. Once the event coordinator approves the online registration test link, it will be open and available for registration.

All events should have a written refund policy to be added to any guides for parents and unit leaders. The policy will be listed on the event registration page. All refunds will be approved by the event coordinator in consultation with the staff advisor.

Things to Consider

When running a district or council activity, there are many things to review and consider as you plan and hold your event. You may think of more, but this is a good start.

- Does your event follow the guidelines of the Guide to Safe Scouting and Age-Appropriate Guidelines?
- What safety moments should you consider?
- What accommodations and modifications to your program should be made so all individuals can participate regardless of physical and mental ability?
- What safety moments and accommodations should you consider for co-ed participation?
- Do you have a plan for walk-in registrations?
- Does your weekend activity provide an opportunity for Scouts to fulfill their Duty to God?
- Do you have a health officer that can administer first aid?

All events must have a copy of the BSA Incident Report Form readily available. Once the health and safety of all is under control, the incident must be reported to the event coordinator and staff advisor.

Any issues involving bullying, hazing, sexual harassment, or other Youth Protection violations must be immediately reported to the event Staff Advisor, District Executive, Scout Executive or their designee.

Purchases & Fiscal Procedures

Below you will find an outline of all policies related to purchase orders, making purchases and being reimbursed, cash advances, and handling money at events.

Purchases

- All purchases totaling, single or multiple receipts, over \$100 must be pre-approved with the staff advisor and have a purchase order assigned. Without approval, the purchaser may not be reimbursed for expenses.
- All vendor purchases such as patches, portable restrooms, and others require pre-approval through the staff advisor who will issue a purchase order.
- All patches are ordered by the staff advisor and shipped to the Council Service Center. Event coordinators should factor in shipping costs when budgeting for recognition.
- Volunteers are eligible to receive a cash advance totaling up to \$1,000 for purchases. The cash advance will be coordinated through the staff advisor and must be reconciled at the completion of the event. All cash advances are required to have original receipts. *Please note, the Council only issues checks for distribution on the 15th and last day of each month, or as they are made available through the council's check approval process.*

Reimbursement for Purchases

- All submissions for reimbursement should be provided to the staff advisor promptly and include original receipts. *Please note, the Council only issues checks for distribution on the 15th and last day of each month, or as they are made available through the council's check approval process.*

Day of Event Money Collection

- The event coordinator will work through the staff advisor to secure a Council receipt book and develop the event check-in process.
- Upon receipt of money, the Council receipt book will be utilized to issue a receipt to the payee, and the remaining two copies are used during the financial reconciliation process.
- All checks should be made payable to Washington Crossing Council, BSA.
- All money collected should be submitted to the staff advisor and provided to the council office within 5 business days.

Purchases & Fiscal Procedures (continued)

Donations

Donations made to an event from outside organizations, companies, vendors, or individuals should be discussed between the event coordinator and staff advisor.

- All donations should be considered gift-in-kind. Cash donations, or services, must be reviewed with the staff advisor for Community FOS. *For example, you have budgeted for Pinewood Derby trophies at \$200, but the local trophy shop is willing to donate them. Since you have already budgeted for the trophies, this is a gift-in-kind.*
- All donations should provide an income value that is reflected in the approved event budget income line. The cost of donated goods should be reflected in the expense line. *This will help in the budget building process for the following year to make sure income and expenses are aligned properly.*
- Unit coordinators must discuss all donation prospects with the staff advisor.

Fundraising

- A table hosted by a unit selling goods (drinks, candy bars, etc.) at an event is considered a unit fundraiser and not considered as part of the event itself.
- Fundraising income and expenses are not considered as part of the activity budget.
- Any unit wishing to fundraise at an event must fill out a Unit Money Earning Application and receive approval from the District Finance Committee and Staff Advisor.
- Any unit wishing to sell perishable goods must follow the state's requirements outlined by the state and local municipality Board of Health, and they must secure the appropriate permits/inspections.
- Income generated from the fundraiser is not a donation to the District or Council, and is income generated for the unit as outlined in the Unit Money Earning Application.

Facilities

If your facility requires a certificate of insurance, please work through your staff advisor to secure the appropriate documentation.

When reserving a facility and entering into a contract, the Scout Executive is the only individual authorized to sign the contract. The event coordinator will work through their staff advisor to secure the required signatures. The staff advisor is listed as the event point of contact.

All events should have appropriate facilities and resources available for disposing of trash and have restrooms available. At least one handicapped enabled bathroom must be made available. Your staff advisor can help in securing portable toilets and wash stations if they are required for your facility.

Whether your event is going to have **Shooting Sports, Climbing, COPE elements, Aquatics, or any other activity that requires specialized equipment and training**, a facility evaluation, BSA requirements, and adult leadership requirements will need to be reviewed with the event coordinator and staff advisor.

Ockanickon Scout Reservation Usage

All council or district activities that would like to use Ockanickon Scout Reservation are required to complete an Ockanickon Usage Request Form.

We recommended all OSR usage requests are submitted at least 1 year in advance to avoid event conflicts. Event Coordinators can submit their usage request form to Michelle Cathers, Program Support. **As you prepare your budget for facility rental fees please contact your staff advisor for the current fee list.**

Tips for a Successful Event at Ockanickon

- Reserve as much as you think you'll need. We can always release portions of your reservation.
- Communicate any specific program needs to your staff advisor. Any program areas such as shooting sports or the climbing tower or must be coordinated through appropriate Chairperson at least three months in advance.
- The staff advisor and event coordinator must meet with the Camp Ranger at least **30 days** before the event for a walk-through.
- Events that require the use of the kitchen must provide a ServSafe trained volunteer.
- All buildings and facilities must be inspected by the event coordinator and Camp Ranger prior to leaving the property.

APPENDIX

Contact #s

Topic	Name	Phone	Email
Budgets	Staff Advisor	varied	varied
Calendar	Michelle Cathers	215-348-7205 x305	michelle.cathers@scouting.org
Cash Advance	Staff Advisor	varied	varied
Certificate of Insurance	Anna Marie Pepper	215-348-7205 x306	annamarie.pepper@scouting.org
Check requests	Staff Advisor	varied	varied
Facility contracts	Staff Advisor	varied	varied
OSR Usage Requests	Michelle Cathers	215-348-7205 x305	michelle.cathers@scouting.org
OSR Ranger	Josh Kuhns	215-297-5290	josh.kuhns@scouting.org
OSR Programs (COPE, Shooting Sports, etc.)	Todd Warner	215-348-7205 x318	todd.warner@scouting.org
Purchase Orders	Staff Advisor	varied	varied
Scout Executive	Magne Gundersen	215-348-7205 x317	magne.gundersen@scouting.org

NJ Mandatory Reporting Hotline
 Toll-Free: (877) 652-2873
 TDD: (800)835-5510
 TYY: (800)835-5510
<http://www.nj.gov/dcf/reporting/how/>

PA Mandatory Reporting Hotline
 Toll-Free: (800) 932-0313
 TDD: (866) 872-1677
<http://www.dhs.pa.gov/citizens/reportabuse>

Incident Reporting Tool

(Events or allegations of injury, illness, or property damage, including employment and directors and officer's issues)

General Incident Details

**Required Fields*

*Incident Date: _____ Incident Time (in 24-hour format): _____

*Report Date: _____

Date Reported to Council/BSA Location: _____

Reported by Name: _____

Reported by Primary Phone: _____ Reported by Secondary Phone: _____

Reported by Email: _____

Reported by Address: _____

Reported by City: _____ Reported by State: _____ Reported by Zip Code: _____

*Council/BSA Location: _____ *Location of Incident: _____

Specific area where incident occurred: _____

Incident Address: _____

Incident City: _____ *Incident State: _____ Incident Zip Code: _____

*Description of Incident (clear/concise/complete facts):

Was an Agency or Authority Notified? Yes No Whom: _____

Injury/Illness/Damage Information

*Claimant Name: _____

Claimant Address: _____

Claimant City: _____ *Claimant State: _____ Claimant Zip Code: _____

Claimant Primary Phone: _____ Claimant Secondary Phone: _____

Claimant Email: _____

Claimant Date of Birth: _____ Age of Claimant: _____

General Classification (Cub Scout/Registered Leader/etc.): _____

Chartered Organization: _____

Property Damage? Yes No Describe: _____

Adventure/Program/Event: _____

Cause/Nature/Injury Detail: _____

Severity Rating: Catastrophic-I Critical-II Marginal-III Negligible-IV Unknown

If medical treatment was provided, please describe: _____

If transported by air/ambulance, please describe: _____

*Are Accident and Sickness forms provided or filed? Yes No Unknown

If certificate of insurance has been provided, please describe: _____

If there is/was a contract for this event, please describe: _____

Did the event occur while transporting to/from activity? Yes No Unknown

Vehicle Involved (Duplicate if needed)

*Owner of vehicle: _____ VIN: _____

License State: _____ Vehicle make/model/year: _____

Description of Vehicle Damage: _____

Weather Conditions: _____

Driver Name: _____

Driver Address: _____

Driver City: _____ Driver State: _____ Driver Zip Code: _____

Driver Phone: _____ Driver Email: _____

Witnesses (Duplicate if needed)

*Witness Name: _____

Witness Address: _____

Witness Email: _____ Witness Primary Phone: _____

Witness Secondary Phone: _____

Witness Type: Adult Youth Unknown

*Witness Name: _____

Witness Address: _____

Witness Email: _____ Witness Primary Phone: _____

Witness Secondary Phone: _____

Attachments such as photos, statements, and this incident report form can be added during online entry and are helpful.

Return this completed form to your council's designated user for entry, or upload into Riskconnect.

REQUEST FOR CERTIFICATE OF LIABILITY INSURANCE

(Please print legibly or type)

PLEASE FILL OUT COMPLETELY

DATE: _____

TO: Anna Marie Pepper - Registrar
Phone: 215-348-7205 x306
Email: annamarie.pepper@scouting.org

FROM: _____ **Unit Type and Number:#** _____
Contact person

PHONE: _____ **Ext.** _____ **Fax #:** _____

EMAIL ADDRESS: _____

Unit or District activity _____

Description of activity _____

Date(s) of activity _____

If certificate is for use of facilities, describe:

Amount Needed \$ _____

If over \$1 million, please attach a copy of the written requirements from the certificate holder.

Certificate holder (Complete name and address):

Has the certificate holder requested to be listed as additional insured? Yes No

Are any fees required for services, use of property, etc.? Yes No

If so, amount being charged? _____

If certificate is for a unit activity, is the certificate holder the chartered organization for the unit involved? Yes No

Additional comments: _____

If Certificate Holder requires specific wording, attach a copy of the requirements. Please allow at least three days for processing of certificate requests. ***Requests are processed in the order in which they are received***

11/13/17 amp

Additional copies of this form can be found at:
<http://www.bsawcc.org/forms>

BUDGET PLANNING AND ACCOUNTING FORM

Name of Event: _____
 Date of Event: _____
 Type of Event: _____

District: _____
 Cost Center: _____

Income Sources		Preliminary Income From Council Budget	Anticipated Income	Actual Income
1	Fees: _____ @ \$ _____			
	Fees: _____ @ \$ _____			
	Fees: _____ @ \$ _____			
2	Donations			
3	Additional patch sales @ \$ _____			
4				
5				
TOTALS		\$ -	\$ -	\$ -

Expenses		Preliminary Expense from Council Budget	Anticipated Expense	Actual Expense
8103	Program Supplies _____			
8103	Program Supplies _____			
8103	Program Supplies _____			
8104	Food and Commissary			
8108	Catering			
8301	Postage			
8402	Rental Fee			
8601	Printing			
9153	Recognition - Youth			
9152	Recognition - Volunteers			
XXXX	Other			
	Contingency Fee (10%)			
TOTALS		\$ -	\$ -	\$ -
Surplus / (Deficit)		\$ -	\$ -	\$ -

Anticipated Budget Prepared by Event Chair and District Executive:

Event Chair _____ Date _____ District Executive _____ Date _____

Anticipated Budget approved by Field Director/Scout Executive

Field Director/ Scout Executive _____ Date _____

This form is intended to be used as a tool in creating the actual costs and expenses for your activity. Your staff advisor will have the history of income and expenses for your event, as well as your preliminary budget that you will modify.

This form will be submitted to the Field Director to build the event's online registration.

Online Calendar & Registration
Request Form

Description: _____

Activity Date: _____ End Date: _____

Activity Time: _____ End Time: _____

Frequency: Once
 Daily
 Weekly Every _____ Days
 Monthly The _____ of every _____

Frequency End Date: _____

Website for Event Pictures _____

Website for Additional Details: _____

Event Contact Email: _____

Details: _____

Event Address: _____ Street

_____ City
_____ State
_____ Zip Code

Online Registration Details

Registration Begin Date/Time _____

Registration End Date/Time _____

Registrant Cost: _____

Minimum Registrants _____ Maximum Registrants _____

Early Discount: _____ Date _____ Discount Amount: _____

Late Fee _____ Date _____ Late Fee amount: _____

Receipt
Contact
Info

Person Name: _____
Address: _____
City: _____
State/Province: _____ Telephone: _____

This page intentionally left blank.

[For Priority Consideration, this form is due May 31, 2019 for the 2020 Calendar year.]

Ockanickon Usage Request – Pricing for Council & District Events Only

Event: _____

Date(s) of Event: _____

Start time of Event: _____ AM/PM End Time of Event: _____ AM/PM

Event Contact Name: _____

Event Contact Phone Number(s): _____

Event Contact Email: _____

Space needed for (estimate): _____ # of participants and staff.

Tent Only Campsites Requested: (\$18 each)						
Camp Side				Lake Side		
	Seneca	\$18	26 Platforms & 1 Ad		Campways	\$18 25 Platforms
	Tohickon	\$18	25 Platforms		Lenape	\$18 32 Platforms
	Out Post Area	\$18			Mohawk	\$18 27 Platforms
					Neshaminy	\$18 18 Platforms
					Scoutcraft Area	\$18
Adirondack Campsites Requested: (Each Ad has 6 bunks)						
Camp Side				Lake Side		
	Ottawa	\$45	7 Ads & 4 Platforms		Ajapeu	\$45 7 Ads & 14 Platforms
	Comanche	\$39	6 Ads & 25 Platforms			
	Quabosco	\$33	5 Ads & 25 Platforms			
	Wakoda	\$33	5 Ads & 6 Platforms			
	Bischewi	\$33	5 Ads & 15 Platforms			
	Shagbark	\$27	4 Ads & 12 Platforms			
	Algonquin	\$21	3 Ads & 14 Platforms			
	Tamanend	\$21	3 Ads & 9 Platforms			
	Hopi	\$15	2 Ads & 9 Platforms			
Lodge(s) Requested:						
	Palmer Lodge A \$98	Capacity 20/ Coed	Canvas, bunk cots, Electricity, Refrigerator, Range, Oven, Wood Stove, Electric Heat			
	Palmer Lodge B \$128	Capacity 40/ Coed	Canvas, bunk cots, Electricity, Refrigerator, Range, Central propane heat, Fireplace			
	Grundy Lodge \$70	Capacity 20	Canvas, bunk cots, Electricity, Refrigerator, Range, Wood Stove			
	Memorial Lodge \$145	Capacity 40	Canvas, bunk cots, Electricity, Refrigerator, Range, Oven, Central Heat and Air Conditioning			

There is an additional charge for utilities in cabins at the current market rate. This cost must be built into the budget.

Communicate any specific program needs to your staff advisor and the Committee Chairperson for the program area needed, such as Shooting Sports and COPE & Climbing.

Contact Bob Fisher at shootingsports@washingtongcrossingbsa.org and Randy Whalen at projectcope@ockanickon.org to coordinate your program and determine fees.

Will your program include any of the following?

BB Gun Rifle Shotgun Pistol Archery Other Shooting Sport

Will your program include any of the following?

Climbing (rock or climbing wall) COPE (Low or High) Aquatics (swimming, boating, etc...) Other High Adventure: _____

Will your program require the use of **Foster Dining Hall**? **\$288** Yes No

Will your program require the use of the **Kitchen**? ServSafe required. **\$145** Yes No

All events at OSR will be charged for use of the **Welcome Center up to \$75.** Yes

of participants & staff: <20 = \$15, <40 = \$30, <60 = \$45, 60+ = \$75

***NOTE: a \$100 cleaning fee will be assessed for each of the above rentals if not cleaned by the renter.**

Will your program require the use of **Dan Beard Field/Pavilion**? **\$88** Yes No

Will your program require the use of a **Parade Field**? **No Charge** (Select One) Grande Office No
Parade fields are not to be used as tent campsites.

Total Estimated Cost of Facility Usage: _____

Please submit this request to your event Staff Advisor: _____

And the Council Camp Coordinator: Michelle Cathers 215-348-7205 ext. 305
Michelle.Cathers@scouting.org

If mailing, please mail to: Washington Crossing Council, BSA
One Scout Way
Doylestown, PA 18901

Request Received:

Facilities Confirmed:

Check Authorization Request

Date Submitted: _____ Entered Date: _____

Vendor Name _____ Total of Request _____ PO# _____

	Inv#	Inv Date	Inv Amount	GL Acct#
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Brief Description _____

SE Approval: _____ Requested By: _____

All supporting documents must be attached!

Check Authorization Request

Date Submitted: _____ Entered Date: _____

Vendor Name _____ Total of Request _____ PO# _____

	Inv#	Inv Date	Inv Amount	GL Acct#
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Brief Description _____

SE Approval: _____ Requested By: _____

All supporting documents must be attached!

PURCHASE ORDER REQUEST FORM

To be submitted to Accounting. Must allow no < one day processing time.

Today's Date _____

Vendor _____

Event Date _____ Acct # ----- _ _ _ _ _

Description of Item _____

Quantity _____ Price each _____ Total _____

Return approved PO to _____

Must include approved budget for associated activity.

This form is required for all vendor purchases, and any reimbursement totaling over \$100.

All purchases must be pre-approved by the event coordinator and staff advisor.

Amount requested should reflect what the anticipated expense in the event budget.

WASHINGTON CROSSING COUNCIL

BOY SCOUTS OF AMERICA

Council/District Activities Procedures

Name of Event: _____ **Date:** _____

I have read these procedures and policies and agree to follow them in the execution of my duties and responsibilities as District Activity or Event Chair.

Signed _____

Name _____

Volunteer Title _____

Date _____

E-mail Address _____

Phone # _____

**PLEASE RETURN THIS PAGE TO YOUR
DISTRICT EXECUTIVE OR STAFF ADVISOR.**

