

**OCBSA Scout-O-Rama Activity Safety Approval and Safety Award Application**

District: \_\_\_\_\_ Pack Troop Team Crew Post Unit Number: \_\_\_\_\_

Unit Booth Coordinator Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Address City Zip

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

**DEADLINE TO TURN IN THIS FORM IS APRIL 23, 2018**

**Theme Of Entry:** \_\_\_\_\_ **Booth Size (10x10 increments):** **X**

Description

Safety Measures

**Does your Booth or Activity include:** **If Yes, please provide safety controls for each hazard or element and adult supervision plan detail below:**

1) Projectiles or thrown Objects?	No	Yes:
2) Climbing over 4 feet?	No	Yes:
3) Pushed or wheeled vehicles?	No	Yes:
4) Cooking, fire, coals, or stoves?	No	Yes:
5) Pugel sticks, padded swords, etc?	No	Yes:
6) Chemical or other reactive substances	No	Yes:
7) Use of knives or other sharps by visitors	No	Yes:
8) Perishable food preparation?	No	Yes:
9) Other recognized hazards?	No	Yes:

**Sketch of Booth or Activity plot (floor) plan REQUIRED, use space below:**

**Council Risk Management approval:** \_\_\_\_\_ **Date:** \_\_\_\_\_