

# HIGH ADVENTURE AWARD FORM



**Council Service Center:**  
1207 Upas Street  
San Diego, CA 92103-5198  
Phone: (619) 298-6121  
<http://www.sdicbsa.org>



**High Adventure Team:**  
<http://highadventure.sdicbsa.org/>

INSTRUCTIONS: To obtain awards submit completed form to the Council Service Center. Please type or print. Application must be legible, accurate, and complete, with original signatures.

Type Unit \_\_\_\_\_ Name of Award \_\_\_\_\_

Unit No. \_\_\_\_\_ No. of Awards requested \_\_\_\_\_ For: \_\_\_\_\_ Youth and \_\_\_\_\_ Adults  
*(list names of ALL participants on reverse side)*

District \_\_\_\_\_

Council \_\_\_\_\_ Park / Wilderness / USFS Permit No. \_\_\_\_\_ Issued by \_\_\_\_\_  
*(if required in area)*

## CERTIFICATION

We, the undersigned in charge, do certify that we **have read** and understand the complete requirements for the award listed above and we do further certify that all of the participants, *whose names are listed on the reverse side*, have met all the requirements for the award listed above. We also certify that the High Adventure trained adult listed below participated in the award activity.

Trained adult: \_\_\_\_\_ / \_\_\_\_\_  
*PRINT NAME* *SIGNATURE*

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Training card number \_\_\_\_\_ *(Water Trek Leader number required for water activity)* Phone \_\_\_\_\_  
*(Backpack Leader number required for all other activities)*

First Aid Card (type) \_\_\_\_\_ Date Issued \_\_\_\_\_  
*(First Aid desired for all awards, mandatory if required for award)*

Youth in charge: \_\_\_\_\_ / \_\_\_\_\_  
*PRINT NAME* *SIGNATURE*

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

## TREK INFORMATION

The following information is needed for those who will follow in your footsteps and will help to improve other opportunities, campsites and trails:

Name of Trail \_\_\_\_\_

Locality of Trail \_\_\_\_\_ Mileage on Trail \_\_\_\_\_

Started Trail at (place) \_\_\_\_\_ Date \_\_\_\_\_

Ended Trail at (place) \_\_\_\_\_ Date \_\_\_\_\_

Campsites used (name or location) \_\_\_\_\_

Recommendations \_\_\_\_\_

Conservation / Trail Building (Hours per person) \_\_\_\_\_ Where \_\_\_\_\_

What was done \_\_\_\_\_

# HIGH ADVENTURE AWARD FORM PARTICIPANT LIST



	YOUTH NAME	NEED AWARD	ADULT NAME	NEED AWARD
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