

Parents or Guardians of Philmont Individual Program Participant:
(NAYLE, OATC, ROCS, Ranch Hands, Trail Crew Trek, STEM and Rayado Men and Rayado Women)

The excitement of a Philmont summer is here and the return to Philmont program has never meant so much to thousands across the country as all Americans strive for a return to pre-pandemic life. Philmont Scout Ranch in collaboration with the New Mexico Department of Health is providing a safe and healthy environment for all participants at Philmont this summer.

Individual program participants can be considered a higher risk for two reasons. First, the majority are unaccompanied minors who have only recently been considered for vaccine distribution. Second, unlike a crew coming to Philmont from the same geographic location and staying in their crew that they traveled with, individual program cohorts are formed upon arrival. As a result of these added risks, additional mitigation procedures have been put into place.

As stated in the letter from Philmont's General Manager, everyone participating at Philmont must arrive with a negative test result taken 3-5 days prior to arrival or provide proof of vaccination. In addition, a rapid test will be conducted with all individual participants during their health screening.

With these processes in mind and pre-travel precautions and the Philmont Covid Code of Conduct and other processes that have been outlined, we will create a strong environment for a safe and healthy summer. But there is always a risk of contracting COVID -19.

With that understanding, we are asking all Parents or guardians of individual program participants to agree to the following:

If the individual program participant that I am responsible for, tests positive at any time during their stay, Philmont will place the participant in isolation (an area that Philmont has already pre-determined and overseen by Doctors and Medical Staff). The parent/guardian will be immediately contacted and apprised of the situation.

You, the parent/guardian agree to travel to Philmont within 72 hours of being contacted to pick up the participant that is in quarantine.

Name of Participant: _____

Program Name: _____

Parent/Guardian Name (Printed): _____

Signature of Parent/Guardian: _____ Date: _____