



**HIGH ADVENTURE**



**ORDER OF THE ARROW  
OCEAN ADVENTURE  
PARTICIPANT GUIDE**



Dear OA Ocean Adventure Participant,

Congratulations on signing up for the 2026 OA Ocean Adventure session! This summer, you will experience Scouting in a way that most people only dream about. You are now a participant in one of the most exciting, challenging, and rewarding high adventure programs in all of Scouting!

As you prepare for this incredible adventure, understand that you are one of just 24 Arrowmen to experience the OA Ocean Adventure (OAOA) this summer. By participating in OAOA, you will be joining an elite group of youth leaders and committed Scouts who have a true passion for adventure and service. You are about to become a part of an amazing legacy of service and transformation.

The OA Ocean Adventure has provided countless opportunities for Arrowmen, like yourself, since 2005. This program offers a chance to grow in Brotherhood with the members of your crew. You will be providing cheerful service to Scouting's very own Big Munson Island. Beyond giving service, you will have the opportunity to go snorkeling in pristine reefs, kayaking on the open sea, and learn more about the Lower Florida Keys and its ecosystem.

To prepare yourself properly, please read all the materials in this packet, as the information contained within will make your experience even greater. I want you to be as physically, mentally, and emotionally prepared for your Ocean Adventure.

Please feel free to contact me with any questions regarding your preparation and planning. We are looking forward to your arrival!

Sincerely,  
Brea Baygents  
National OA Associate Director  
(972) 580-2175





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## INSURANCE

Scouting America carries accident and sickness insurance coverage for all Sea Base participants from the time they leave home until they return. This policy is secondary to a family policy that might be in effect. The name and policy number of your family's insurance needs to be on the medical form.

## MEDICAL FORM

Bring your completed annual health and medical record form to Sea Base (parts A, B and C signed by a physician)! The hardcopy form will be collected when you check in on your arrival day. Ensure your parents' and physician's signatures, as well as insurance information (if any), are on the form. The form is sent along with other documents in this packet.

## EXPEDITION NUMBER

Your crew will have an expedition number. Your crew number will be OAOA-053126 if you are in Session 1 and OAOA-06182026 if you are in Session 2, and OAOA-062626 if you are in Session 3.

## SWIM CHECK

Please bring a completed swim check form. Swim checks will not take place at Sea Base. Form is available in the appendix.

## PERSONAL FITNESS

Every participant in the Florida Sea Base High Adventure program needs to be physically fit for the strenuous demands that will be placed on their body. Get in shape! Stay in shape! You will be in the water a great deal, so go swimming at your local pool often. Do some light exercises to increase your stamina; you will be frequently lifting your body in and out of the water. You will be paddling many miles on the open ocean, so be prepared and physically ready.

**Be Prepared.** You have dedicated a lot of your personal time and resources to come to Sea Base. Get the most out of your experience by being ready - physically and mentally.

- Make sure you complete the Scouting America swim test.
- Make sure you are registered with Scouting America.
- Don't forget to bring a photocopy of the front and back of your insurance card.
- People weighing over 295 pounds are ineligible for participation.
- All participants must meet eligibility requirements.





## TRANSPORTATION

You will be responsible for your transportation to and from Sea Base. Information for arrival by flights and private vehicles is provided below, If you are arriving by personal vehicle, please enter it in NOAERS.

## SHUTTLE

If you are not driving, there are many transportation options to get from the nearby airports to the Brinton Environmental Center. One option is the Keys Shuttle.

If you are using this shuttle, please make travel arrangements to arrive at the airport before 1:30 PM EST on your arrival date and departing after 1 PM on your departure date. Reservations can be made to Keys Shuttle by calling (305) 289-9997 or by visiting <https://www.keysshuttle.com/>.

## ARRIVAL AND DEPARTURE INFORMATION

All Arrowmen are expected to arrive at the Brinton Environmental Center between 1:00 PM and 5:00 PM EST on the arrival day and depart between 7:00 AM and 10:00 AM on the departure day. Meeting these expectations for arrival and departure are important aspects in helping the staff provide a quality program. The Brinton Environmental Center address is:

23800 Overseas HWY, Summerland Key, FL 33042

If you become delayed in route or with any questions about travel, please call the National OA Associate Director, Brea Baygents at (972) 580-2175 or Sea Base at (305) 664-5640.

## INDIVIDUAL ARRIVAL PLANS

Please share your travel plans with us by visiting [registration.oa-scouting.org](https://registration.oa-scouting.org) and login using your ArrowID you created to register. Then click on My Events and then select travel on the left-hand side of the screen. Enter your travel information so we know when and where you will arrive. Ensure both an Arrival and Departure plan are recorded.

If you are flying, please enter your flight scheduled arrival and departure time. Do not add additional time to your arrival or departure. If you are flying with a connection, please only enter the leg of your trip that arrives or departs at the airport in Florida.





## DIETARY NEEDS

If you have any dietary restrictions it's important that you fill out the Dietary Restrictions Notification Form by visiting [https://forms.office.com/pages/responsepage.aspx?id=oAiQ\\_UZ4iUmKxXfPrT9-TpTab0d12iBEjHplgQU7jhNUMDZaSEJvWUtTUjRKRURGRVlJQUIOWE9YSy4u&route=shorturl](https://forms.office.com/pages/responsepage.aspx?id=oAiQ_UZ4iUmKxXfPrT9-TpTab0d12iBEjHplgQU7jhNUMDZaSEJvWUtTUjRKRURGRVlJQUIOWE9YSy4u&route=shorturl).

## PROGRAM FEES

Participant fee for OA Ocean Adventure is \$1000.

A deposit of \$50 is due with your application. The additional \$950 is due with the return of your acceptance notice. No participants will be allowed to begin their trek until their program fee is paid in full. \$500 is due by Monday, February 16<sup>th</sup>, and the full payment is due by March 31<sup>st</sup>. Full refunds will be available for cancellations made by April 30<sup>th</sup>. Cancellations after this point will be eligible for a refund of up to \$950 dependent on the slot being filled by a waitlist candidate.

## MESSAGES AND COMMUNICATION

Do not have mail sent. Sea Base offers programs to thousands of Scouts on the sea, on the land, and on an island. We cannot deliver mail from home to Scouts. In case of an extreme emergency, contact can be made at (305) 664-5640.

Cell Coverage. While on base, there will be cell coverage to contact family, confirm travel arrangements, check-in for flights, etc. Please note however, for the majority of the adventure, you will be in areas where cell coverage is not available and you will not be able to be reached via phone. In case of an emergency and you need to be reached, please inform your family that they should contact the National OA Associate Director, Brea Baygents, at (972) 580-2175 or the Florida National High Adventure Sea Base at (305) 664-5640 and we will establish contact accordingly.

## FISHING LICENSE

You MAY need to purchase a license, but this will be handled once you arrive on-site with assistance from OAOA staff. Please do not purchase a fishing license ahead of time.





## PAPERWORK & ARRIVAL CHECKLIST

- Scouting America Health and Medical Record (signed by a doctor within the last year) and copy of your Medical Insurance Information
- Seabase Pre-Event Medical Checklist
- Visit [registration.oa-scouting.org](https://registration.oa-scouting.org) with your ArrowID to:
  - Enter personal arrival information
  - Register and pay for shuttle if needed
- Swim check form (Must be completed before you arrive)
- Proof of Safeguarding Youth Training (If 18 or older)

Please be sure to have ALL the required paperwork when you arrive at Sea Base on your first day; any missing items could delay the start of your trek.

## PACKING INFORMATION

Some items on the packing list have links to examples of the item. You do not need to purchase the exact item in the link as it is just a suggestion.

No Dive Knives! Dive knives are not allowed at the Florida Sea Base. Pocket knives are highly discouraged as the salt water can begin to make them rust in as little as 1-2 days.

Do not bring any of the following items:

- MP3 Player
- Hammocks
- Firearms or Fireworks
- Spear Guns
- Personal Music Player or video games
- Mess kits
- Aerosol sunscreen

“The smell of the morning is an adventure, and if you can start the day going outdoors and sniffing the air, there is always a life to the spirit” -Sigurd F. Olson, *The Singing Wilderness*





## PACKING LIST- OAOA PARTICIPANTS

### WHAT TO BRING

- [Snorkel + Snorkel Mask](#) (Sea Base Requirement)
- [Neck Gaiter or Buff](#) (Sea Base Requirement)
- Polarized Sunglasses with strap
- Wide Brimmed Hat or Ball Cap (Even if you don't usually wear one)
- +45 SPF sunscreen (no spray sunscreen)
- Full BSA Class A Uniform (with OA sash)
- [2 UPF +45 Shirts \(at least 1 long sleeve\)](#)
- 2 Pairs of shorts: 1 swimsuit, 1 land
- 1 Swimsuit
- [Lightweight zip off pants \(for service and sun protection\)](#)
- 1 Set of non-BSA (civilian) clothes
- 4-5 pairs of Socks
- 4-5 pairs of Underwear
- 4-5 sports bras
- 2 towels (one for the adventure, one for showers before departing for home)
- 1 pair of sneakers or hiking boots (for service)
- 1 pair of sandals (heel strap is highly recommended)
- Lightweight rain gear
- Non-aerosolized bug spray/insect repellent
- [Lightweight sleeping bag](#), bed sheet, or blanket
- [Quart size water bottle](#)
- [Medical Powder](#) (Gold Bond)
- [Flashlight/Headlamp](#) (a red light mode feature is recommended)
- Toiletry Kit (including soap and shampoo for shower before returning home)

### HIGHLY RECOMMENDED

- Waterproof Camera (Cell phones will not be permitted to be used as cameras)
- Extra money for souvenirs (will be available in Sea Base Shipstore)
- Aloe Vera Gel
- Trek Journal
- Playing Cards

"I think that we ought to eat all our provisions now, so that we shan't have so much to carry." -Christopher

Robin





# APPENDIX



## Appendix A: Swim Classification Form

### Swim Classification Record

(Changes and/or corrections to the following chart should be initialed and dated by the test supervisor.)

Unit Number \_\_\_\_\_

Date of Swim Test \_\_\_\_\_

	Full Name (Print) (Draw lines through blank spaces)	Medical Recheck Parts A-B	Swim Classification		
			Non-Swimmer	Beginner	Swimmer
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

The swim classification test performed at a unit level should be conducted by one of the following council-approved resource people: Aquatics Instructor, BSA; BSA Lifeguard; BSA Swimming & Water Rescue; or other lifeguard, swimming instructor, etc. Test administrators should utilize chapter 5 of the [BSA Aquatics Supervision Guide](#).

**NAME OF PERSON SUPERVISING & FACILITATING THE SWIM TEST:**

\_\_\_\_\_

Print Name

\_\_\_\_\_

Signature

\_\_\_\_\_

Type of Authorization/Training  
(Attach a copy of certification if required by council procedure)

\_\_\_\_\_

Expiration Date if applicable

## Appendix B: Whitewater Rafting Release

# BSA Pre-Event Medical Screening Checklist

This is a tool to help leaders identify potentially communicable diseases in advance of event participation. The intent of this checklist is to review with each participant their current health status both before departure and upon arrival at the event.\*

Crew Leader Name: \_\_\_\_\_ Arrival Date: \_\_\_\_\_

Sea Base Crew Number: \_\_\_\_\_

Review the following symptoms with each participant in your crew before departure to Sea Base. List each participant on page 2, complete, print, and submit one checklist per crew attending.

**Do not participate** if you have any of the following symptoms in the past 24 hours:

- Fever (100.4° F or greater)
- Vomiting
- Diarrhea
- New cough

**Do not participate** if you or anyone you live with has recently tested positive for COVID-19 or does not have test results back.

If you or any of your crew members have a positive COVID-19 test, follow the CDC guidance for isolation and your personal health care provider's treatment recommendations.

Be responsible for your health and that of others. Isolate if you are sick. Do not attend any activity/meeting/event if you, anyone you live with or anyone you have recently been around feel unwell. Symptoms might include:

- Unexplained extreme fatigue
- Unexplained muscle aches
- New rash
- Sore throat
- Open sore

**Participants who are symptomatic or ill should not attend or return to an activity until cleared by their health care provider.**



Sea Base Crew/Expedition Number: \_\_\_\_\_  
(ex: CR062823-C or KA072523-A)

Unit Type & Number: \_\_\_\_\_  
(ex: Troop 333 or Ship 444)

**The Pre-Event Medical Screening Checklist has been reviewed by the following list of participants (first and last name):**

*Print and submit one checklist per crew reserved.*

	First Name	Last Name	Middle Name (optional)	Check this box if the participant is free of symptoms described on page 1.
1				<input type="checkbox"/>
2				<input type="checkbox"/>
3				<input type="checkbox"/>
4				<input type="checkbox"/>
5				<input type="checkbox"/>
6				<input type="checkbox"/>
7				<input type="checkbox"/>
8				<input type="checkbox"/>
9				<input type="checkbox"/>
10				<input type="checkbox"/>
11				<input type="checkbox"/>
12				<input type="checkbox"/>
13				<input type="checkbox"/>
14				<input type="checkbox"/>
15				<input type="checkbox"/>
16				<input type="checkbox"/>
17				<input type="checkbox"/>
18				<input type="checkbox"/>
19				<input type="checkbox"/>
20				<input type="checkbox"/>

\_\_\_\_\_  
Unit Leader Signature

\_\_\_\_\_  
Date

Unit Leader Full Name (printed): \_\_\_\_\_

For Office Use Only:	
<input type="checkbox"/> Reviewed by Sea Base Staff	Name of Staff Member: _____
_____ Sea Base Staff Member Signature	_____ Date

## Appendix C: Scouting America Health and Medical Record

The Medical form can be found at <https://www.scouting.org/health-and-safety/ahmr/>.

1. Make sure to download and use the most up to date Scouting America Health and Medical Record. If you scroll down the page you will find the Sea Base specific AMHR.
2. Make sure to take the Sea Base Risk Advisory (the last page of the form) with you for your physician to review.