

Kit Carson Chapter Trace – June 5 – June 8, 2025



I share with you the warmth and glow of this campfire. These crimson flames are a symbol of our fellowship and adventures in camping. I promise to share with you the warmth of Christian friendship and with others the light of my Christian testimony. I promise to keep alive the spirit of FCF in my personal life and to observe at all times the principles of Royal Rangers.



Wood Cattle Co Ranch

11792 CR 33

Parshall, CO 80468

Location: GPS 39.9978950N, -106.2356908W

From the East, at the small town of Parshall, CO, head south on County Road 3 for approx. 4 miles. Near the southeast end of Williams Fork Reservoir turn west on County Road 33 and continue approx. 3 miles to the Wood Cattle Co Ranch.

Or

From the West, off Hwy 40 approx 7 miles west of Parshall, turn south on County Road 39, continue south approx. 1 mile. At the junction turn east (left) onto County Road 33, continue approx. 4.5 miles to the west side of Williams Fork Reservoir. Continue on County Road 33 south approx. 2.5 miles around the west side of the reservoir to the Wood Cattle Co Ranch.

Turn into the ranch driveway, continue straight past the house, outbuildings, and corrals. The drive turns into a 2 track road, passes through a gate and then turns downhill into the pasture where camp will be held.

Welcome to the 2025 Kit Carson Chapter Trace. I am looking forward to seeing everyone around the campfire once again. This year we will have the Frontier Adventure, Wilderness and Buckskin advancement testing. We will hold our friendly competitions with Young Bucks and Old Timers, as well as the FCF auction for BGMC. Please consider bringing items to donate to the auction. We are also having community stew Saturday evening. The chapter will provide the meat for the stew, but we need each person attending to bring 1 or 2 cans of ingredients for the stew. Instead of a set camp fee this year we are asking each person attending to make a donation. Fees in the past have been \$35.

If you have questions, contact "Quiet Elk" Paul Holden by email at holden6.2002@gmail.com or cell phone at 970-361-0893.

2025 Trace Schedule

<u>Thurs, June 5, 2025</u>	
9:00 AM	Site set up by Chapter staff and others as assigned
NOON	Registration for Trace opens
1:30 PM	Frontier Adventure, Buckskin Testing and Wilderness Testing begin
5:00 PM	Dinner with friends ➤ Wilderness candidates' - dinner provided
6:30 PM	Advancement testing continues
8:30 PM	Prayer vigil for the camp – all are welcome to attend
11:00 PM	Lights out – Quiet in camp
<u>Fri, June 6, 2025</u>	
7:30 AM	Breakfast
8:30 AM	Morning Devotion, then afterward Frontier Adventure and Buckskin testing continue
12:00 NOON	Lunch with your outpost
2:30 PM	Chapter meeting (Attendance required) Auction for BGMC
5:00 PM	Dinner with friends
7:00 PM	Buckskin Ceremony followed by Frontier Adventure Council of Achievement followed by Wilderness Ceremony followed by Council Fire Service
****	Sometime after Council service it will be time to count coup.
11:00 PM	Lights out – Quiet in camp
<u>Sat, June 7, 2025</u>	
8:00 AM	Morning Devotion and announcements
8:20 AM	Love Blanket
9:30 AM – NOON	Competitions open Outfit judging Hawk Throwing Knife Throwing Flint and Steel – timed event Black Powder Trail Walk
12:00 NOON	Lunch >>Deliver your Community Stew fixin's (1-2 cans/person)
1:30 PM – 5:30 PM	All Competitions Continue
** 3:30 PM **	Seneca Run Begins – Young Buck and Old Timer Team
6:00 PM	Dinner (Community Stew)
8:00 PM	Council Fire Service
****	Cobbler-hopping and fellowship
11:00 PM	Lights out – Quiet in camp
<u>Sun, June 8, 2025</u>	
9:00 AM	Morning Devotion and announcements Awards Ceremony
10:00 AM	Camp closed

This schedule is subject to change prior to and during Trace as needed.

CAMP RULES

AND INFORMATION

- Vehicles are only allowed in camp for the purposes of off-loading or loading camping gear for three hours only. All vehicles must be parked in the parking area after off-loading. Permission to move a vehicle into the camping area must be obtained from the FCF President.
- All Fires must be small and contained in an above ground barrel. (Subject to local fire restrictions and the property owners)
- All trash must be placed in trash containers. You will be responsible for disposing of your own trash.
- If you are using charcoal, PLEASE use Matchlight charcoal for safety rather than charcoal lighter fluid.
- For the Community Stew, the Chapter is providing the meat & seasonings. But lots of vegetables, canned or fresh, will be needed.
- **Attendance at all assemblies is required of all campers. Outposts are to be on time.**
Attendance at council fire services is not optional. You must stay until the service is over. Do not hurry from the altar for the sake of coffee and hot chocolate (or even cobbler).
- No dogs allowed (service animals excepted)
- **All firearms must be unloaded when in camp. Exception for concealed carry handgun permit holders and law enforcement officers should be disclosed to the FCF President or Scribe upon arrival.**
- **If wildlife is present at the rifle range, all shooting must cease immediately.**

Outpost Commanders

I have read and agree to cooperate with the **Camp Rules**. I will see to it that my outpost is aware of and abides by the rules.

Commander: _____

2025 Kit Carson Trace

Participant Name: _____

Knife/Hawk and Black Powder Permission

I am the parent or guardian of _____ who is a member of the Royal Rangers Ministry. I give him permission to sell, trade, give, receive, or barter and have in his possession during this FCF event any knife or black powder firearm as is appropriate for this type of historical reenactment activity. Please consider this document as written consent for my son to participate in any of the Frontiersman Camping Fellowship activities which include black powder loading and shooting, knife and hawk throwing, flint and steel fire starting, frontiersmen crafts and workshop classes, and any other activities conducted. I will hold harmless any and all leaders or officers of any unforeseen accidents, even though great care for safety is always taken.

Signature of parent or guardian: _____ Date: _____

If you do not want your son participating in any of the above activities please list below:

Signature of parent or guardian: _____ Date: _____

Camp fees: This year we are asking for donations to help cover the cost. In the past we have charged \$35.00 / person.	E-mail application form(s) to: Josh Chesebro At jjchese@gmail.com And CC Paul Holden At holden6.2002@gmail.com	Make Checks or Money orders payable to: RMDC We are asking that donations be made at the on-site registration.
<i>If you are under the age of 18, you must have this form signed by your parent or guardian in order to participate in the above-mentioned activities.</i>		

2025 FCF Trace Registration, Medical Record, and Consent Form

Last Name:		First Name:	
Street or PO Box:			
City:		State:	Zip:
Home Phone:		Mobile Phone:	
Email Address:			Date of Birth:
Church You Attend:			Outpost #:
FCF Name:	<input type="checkbox"/> Frontiersman <input type="checkbox"/> Buckskin <input type="checkbox"/> Wilderness	Last Advancement Yr.	
Trappers Brigade Level: <input type="checkbox"/> Company <input type="checkbox"/> Bourgeois <input type="checkbox"/> Free Trapper	Free Trapper Numeral:		
Emergency Contact			
Name (First & Last):			
Primary Phone:		Alternate Phone:	
Insurance Info: (name & numbers): OPTIONAL			

Health History: To be completed by the adult applicant (over age 18) or by minor's parent/guardian (applicant under age 18).

Has the applicant experienced the following? Check either Yes or No. If "Yes" explain under "Remarks and medical facts."

	Yes	No		Yes	No		Yes	No	Give the last date of inoculation or vaccination against the following if known.
Sinus Condition			Hepatitis-past 6 mo.			Taking prescription medications			
Ear Problem			Shortness of breath			Any reaction to drugs or medicine of any type			
Lung Problem			Skin infection			Exposed to infectious disease in past 3 weeks			Tetanus / /
Heart trouble			Hearing difficulty			Any disorder preventing strenuous activity			Measles / /
High blood pressure			Bad eyesight			Any medical care in the past year			Polio / /
Allergy - Asthma			Wear contact lenses			Any surgery within the past year			Small Pox / /
Fainting or dizzy spells			Special diet required						Typhoid / /
Diabetes			Appendix removed			Vaccine Exemption – medical – personal – religious			Diphtheria / /

I am currently taking the following medications:	Food, Drug, Other Allergies (include severity):	Remarks and medical facts:

PARTICIPANT'S SIGNATURE: I agree to abide by and cooperate with all policies, commanders and fellow participants. My signature acknowledges that I have truthfully abided by the requirements as stated on this application form. My signature also indicates my permission for emergency medical treatment while at this activity. I agree that I may be photographed to be used in promotional material.

PARTICIPANT'S SIGNATURE

DATE

Minors (under 18): Parent/Legal guardian consent: The signature of a parent or legal guardian is required for a minor to attend this event. The parent's or legal guardian's signature below indicates permission to administer medical attention to the minor in the event of an emergency and permission to the physician selected by the Activity Commander (or delegate) to hospitalize and secure proper treatment (including surgery). It is understood that the activity officials will make a conscientious effort to locate emergency contacts listed on this form. I will fully pay for all medical expenses incurred. If an injury occurs at the activity it must be reported. I also agree that my child may be photographed to be used in promotional material (e.g., newsletters, website, etc.).

Print complete name of minor

PARENT/LEGAL GUARDIAN SIGNATURE

DATE

Adults (18 years of age or older): Pastor or Leadership Certification for Church Worker: I am personally acquainted with the adult applicant, and in my opinion, they are a competent and qualified youth worker. I know of no facts or allegations that raise any questions concerning their suitability for working with minors in this activity.

PASTOR OR LEADERSHIP SIGNATURE

DATE

NOTE: Anyone over the age of 18 years of age MUST have the Certification signed by either their Pastor, FCF member in good standing or District Council. NO EXCEPTIONS!

Required Release Signature