



Athletics Merit Badge Workbook

SCOUTMASTER BUCKY

Scouts participating in a Scoutmaster Bucky merit badge opportunity, whether online or in person, should consider using the Athletics merit badge pamphlet for discovery and knowledge, along with the class preparation pages for clarifications, insights, and expectations.

<https://scoutmasterbucky.com/merit-badges/athletics/athletics-pamphlet.pdf>

<https://scoutmasterbucky.com/merit-badges/athletics/athletics-cpp.pdf>

IF MEETING ANY OF THE REQUIREMENTS FOR THIS MERIT BADGE IS AGAINST THE SCOUT'S RELIGIOUS CONVICTIONS, THE REQUIREMENT DOES NOT HAVE TO BE DONE IF THE SCOUT'S PARENT OR GUARDIAN AND THE PROPER RELIGIOUS ADVISORS STATE IN WRITING THAT TO DO SO WOULD BE AGAINST RELIGIOUS CONVICTIONS. THE SCOUT'S PARENT OR GUARDIAN MUST ALSO ACCEPT FULL RESPONSIBILITY FOR ANYTHING THAT MIGHT HAPPEN BECAUSE OF THIS EXEMPTION.

REQUIREMENT 6b REQUIRES COUNSELOR APPROVAL.

REQUIREMENT 6b REQUIRES PARENT / GUARDIAN APPROVAL.

REQUIREMENT 1a: Explain to your counselor the most likely hazards you may encounter during athletics activities, and what you should do to anticipate, help prevent, mitigate, and respond to these hazards.

HAZARD #1

Description:

Anticipate:

Help Prevent:

Mitigate:

Respond:



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HAZARD #2

Description:

Anticipate:

Help Prevent:

Mitigate:

Respond:



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HAZARD #3

Description:

Anticipate:

Help Prevent:

Mitigate:

Respond:



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HAZARD #4

Description:

Anticipate:

Help Prevent:

Mitigate:

Respond:



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HAZARD #5

Description:

Anticipate:

Help Prevent:

Mitigate:

Respond:



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HAZARD #6

Description:

Anticipate:

Help Prevent:

Mitigate:

Respond:



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REQUIREMENT 1b:

Show that you know first aid for injuries or illnesses that could occur while participating in athletics events, including sprains, strains, contusions, abrasions, blisters, dehydration, heat reactions, and concussions.

Sprains:

Strains:

Contusions:

Abrasions:



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Blisters:

Dehydration:

Heat Reactions:

Concussions:



Athletics Merit Badge Workbook

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REQUIREMENT 2a: Before completing requirements 3 and 5, have your health-care practitioner give you a physical examination, using the Scout Annual Health and Medical Record form.

Download the latest Scouting America Annual Health and Medical Record Forms before meeting with your Health-Care Practitioner.

<https://www.scouting.org/health-and-safety/ahmr/>

Be sure to bring your forms to review with your merit badge counselor.

BE PREPARED!

REQUIREMENT 2b: Explain the importance of a physical exam.

Notes:

REQUIREMENT 2c: Explain the importance of maintaining good health habits.

Notes:



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REQUIREMENT 2c: Explain how the use of tobacco products, alcohol, and other harmful substances can negatively affect your health and your performance in athletic activities.

Notes:

REQUIREMENT 2d: Explain the importance of maintaining a healthy diet.

Notes:

REQUIREMENT 3: Select an athletic activity that interests you, then do the following:

Selected Athletic Activity:

REQUIREMENT 3a: With guidance from your counselor, establish a personal training program suited to the activity you have chosen. Follow this training program for three months.

Consider laying out a plan to start with, then review and adjust with your merit badge counselor.

This requirement should be reviewed with your merit badge counselor.

Once your program is approved, track separately for three months.



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REQUIREMENT 3b: Create a chart to monitor your progress during this time.

WEEK # 2	Sat																			
	Fri																			
	Thu																			
	Wed																			
	Tue																			
	Mon																			
	Sun																			
WEEK # 1	Sat																			
	Fri																			
	Thu																			
	Wed																			
	Tue																			
	Mon																			
	Sun																			
Exercise Description																				



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REQUIREMENT 3b: Create a chart to monitor your progress during this time.

WEEK # 4	Sat																			
	Fri																			
	Thu																			
	Wed																			
	Tue																			
	Mon																			
	Sun																			
WEEK # 3	Sat																			
	Fri																			
	Thu																			
	Wed																			
	Tue																			
	Mon																			
	Sun																			
Exercise Description																				



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REQUIREMENT 3b: Create a chart to monitor your progress during this time.

WEEK # 6	Sat																			
	Fri																			
	Thu																			
	Wed																			
	Tue																			
	Mon																			
	Sun																			
WEEK # 5	Sat																			
	Fri																			
	Thu																			
	Wed																			
	Tue																			
	Mon																			
	Sun																			
Exercise Description																				



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REQUIREMENT 3b: Create a chart to monitor your progress during this time.

WEEK # 8	Sat																			
	Fri																			
	Thu																			
	Wed																			
	Tue																			
	Mon																			
	Sun																			
WEEK # 7	Sat																			
	Fri																			
	Thu																			
	Wed																			
	Tue																			
	Mon																			
	Sun																			
Exercise Description																				



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REQUIREMENT 3b: Create a chart to monitor your progress during this time.

WEEK # 10	Sat																			
	Fri																			
	Thu																			
	Wed																			
	Tue																			
	Mon																			
	Sun																			
WEEK # 9	Sat																			
	Fri																			
	Thu																			
	Wed																			
	Tue																			
	Mon																			
	Sun																			
Exercise Description																				



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REQUIREMENT 3b: Create a chart to monitor your progress during this time.

WEEK # 12	Sat																			
	Fri																			
	Thu																			
	Wed																			
	Tue																			
	Mon																			
	Sun																			
WEEK # 11	Sat																			
	Fri																			
	Thu																			
	Wed																			
	Tue																			
	Mon																			
	Sun																			
Exercise Description																				



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REQUIREMENT 3c: Explain to your counselor the equipment necessary to participate in this activity.

Notes:

REQUIREMENT 3c: Explain to your counselor the appropriate clothing for the time of year.

Notes:

REQUIREMENT 3d: At the end of three months, review the chart you created for requirement 3b, and discuss with your counselor what progress you have made during training.

Be sure to bring your training sheets to share with your merit badge counselor.

This requirement must be reviewed with your merit badge counselor.

BE PREPARED!

REQUIREMENT 3d: Tell how your development has affected you mentally and physically.

Notes:



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REQUIREMENT 4a: Give the rules for two athletic activities, one of which is the activity you chose for requirement 3.

ATHLETIC ACTIVITY #1:

Selected Athletic Activity from Requirement 3:

Rules:

ATHLETIC ACTIVITY #2:

Selected Athletic Activity:

Rules:



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REQUIREMENT 4b: Discuss the importance of warming up and cooling down.

Notes:

REQUIREMENT 4c: Explain to your counselor what an amateur athlete is.

Notes:

REQUIREMENT 4c: Explain to your counselor the differences between an amateur and a professional athlete.

Notes:



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REQUIREMENT 4d: Discuss the traits and importance of good sportsmanship.

Notes:

REQUIREMENT 4d: Tell what role sportsmanship plays in both individual and group athletic activities.

Notes:



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COMPLETE THE ACTIVITIES IN FOUR OF THE FOLLOWING OPTIONS AND SHOW IMPROVEMENT OVER A THREE-MONTH PERIOD

REQUIREMENT 5:

OPTION 1: SPRINTING

- A. 100-METER DASH
- B. 200-METER DASH

OPTION 2: LONG-DISTANCE RUNNING

- A. 3K RUN
- B. 5K RUN

OPTION 3: LONG JUMP OR HIGH JUMP

- A. RUNNING LONG JUMP OR RUNNING HIGH JUMP (BEST OF THREE TRIES)
- B. STANDING LONG JUMP OR STANDING HIGH JUMP (BEST OF THREE TRIES)

OPTION 4: SWIMMING

- A. 100-METER SWIM
- B. 200-METER SWIM

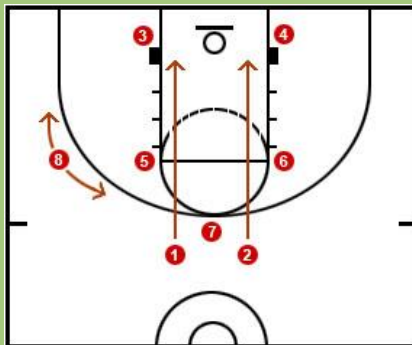
OPTION 5: PULL-UPS AND PUSH-UPS

- A. PULL-UPS IN TWO MINUTES
- B. PUSH-UPS IN TWO MINUTES

OPTION 6: BASEBALL THROW

- A. BASEBALL THROW FOR ACCURACY, 10 THROWS AT A TARGET
(DISTANCE TO BE DETERMINED BY AGE)
AGES 11 TO 12, 20 FEET AGES 13 TO 15, 30 FEET AGES 16 TO 17, 40 FEET
- B. BASEBALL THROW FOR DISTANCE, FIVE THROWS (TOTAL DISTANCE)

OPTION 7: BASKETBALL SHOOTING



- A. BASKETBALL SHOT FOR ACCURACY, 10 FREE-THROW SHOTS
- B. BASKETBALL THROW FOR SKILL AND AGILITY
THE FOLLOWING SHOTS AS SHOWN ON THE DIAGRAM
- 1. LEFT-SIDE LAYUP
- 2. RIGHT SIDE LAYUP
- 3. LEFT SIDE OF HOOP, ALONG THE KEY LINE
- 4. RIGHT SIDE OF HOOP, ALONG THE KEY LINE
- 5. WHERE KEY LINE AND FREE-THROW LINE MEET, LEFT SIDE
- 6. WHERE KEY LINE AND FREE-THROW LINE MEET, RIGHT SIDE
- 7. TOP OF THE KEY
- 8. ANYWHERE ALONG THE THREE-POINT LINE.

OPTION 8: FOOTBALL KICK OR SOCCER KICK

- A. GOALS FROM THE 10-YARD LINE, EIGHT KICKS
- B. FOOTBALL KICK OR SOCCER KICK FOR DISTANCE, FIVE KICKS (TOTAL DISTANCE)

OPTION 9: WEIGHT TRAINING

- A. CHEST/BENCH PRESS, TWO SETS OF 15 REPETITIONS EACH
- B. LEG CURLS, TWO SETS OF 15 REPETITIONS EACH



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FOR USE WITH REQUIREMENT 5:

MY TRACKING SHEET												
Activity	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Week 9	Week 10	Week 11	Week 12
GROUP 1: Sprinting												
100-meter dash												
200-meter dash												
GROUP 2: Long Distance Running												
3K run												
5K run												
GROUP 3: Long Jump or High Jump												
Running long/high jump												
Standing long/high jump												
GROUP 4: Swimming												
100-meter swim												
200-meter swim												
GROUP 5: Pull-ups and Push-ups												
Pull-ups in two minutes												
Push-ups in two minutes												
GROUP 6: Baseball Throw												
For accuracy – 10 throws												
For distance – 5 throws total distance												



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FOR USE WITH REQUIREMENT 5:

MY TRACKING SHEET												
Activity	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Week 9	Week 10	Week 11	Week 12
GROUP 7: Basketball												
For accuracy – 10 free-throw shots												
For skill / agility (see below)												
1. Left-side layup												
2. Right-side layup												
3. Left side along key line												
4. Right side along key line												
5. Left key line/free-throw												
6. 7Right key line / free-throw												
7. Top of the key												
8.Three-point line												
GROUP 8: Football / Soccer Kick												
From 10-yard line – 8 kicks												
For distance – 5 kicks total distance												
GROUP 9: Weight Training												
Chest/bench press – 2 sets 15 reps												
Leg curls – 2 sets 15 reps												



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REQUIREMENT 6a:

Prepare plans for conducting a sports meet or field day that includes 10 activities, at least five of which must come from the groups mentioned in requirement 5. Outline the duties of each official needed and list the equipment the meet will require.

Notes for Plan:



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ACTIVITY #1:

FROM REQUIREMENT 5? ☐ YES ☐ NO

Activity #1:

Duties of Official(s):

List of Needed Equipment:

ACTIVITY #2:

FROM REQUIREMENT 5? ☐ YES ☐ NO

Activity #1:

Duties of Official(s):

List of Needed Equipment:



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ACTIVITY #3:

FROM REQUIREMENT 5? ☐ YES ☐ NO

Activity #1:

Duties of Official(s):

List of Needed Equipment:

ACTIVITY #4:

FROM REQUIREMENT 5? ☐ YES ☐ NO

Activity #1:

Duties of Official(s):

List of Needed Equipment:



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ACTIVITY #5:

FROM REQUIREMENT 5? ☐ YES ☐ NO

Activity #1:

Duties of Official(s):

List of Needed Equipment:

ACTIVITY #6:

FROM REQUIREMENT 5? ☐ YES ☐ NO

Activity #1:

Duties of Official(s):

List of Needed Equipment:



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ACTIVITY #7:

FROM REQUIREMENT 5? ☐ YES ☐ NO

Activity #1:

Duties of Official(s):

List of Needed Equipment:

ACTIVITY #8:

FROM REQUIREMENT 5? ☐ YES ☐ NO

Activity #1:

Duties of Official(s):

List of Needed Equipment:



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ACTIVITY #9:

FROM REQUIREMENT 5? ☐ YES ☐ NO

Activity #1:

Duties of Official(s):

List of Needed Equipment:

ACTIVITY #10:

FROM REQUIREMENT 5? ☐ YES ☐ NO

Activity #1:

Duties of Official(s):

List of Needed Equipment:



Athletics Merit Badge Workbook

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REQUIREMENT 6b: With your parent or guardian's and counselor's approval, serve as an official or volunteer at a sports meet to observe officials in action. Tell your counselor about your responsibilities at the meet and discuss what you learned.

Sport or Event:

Date and Location:

PARENT / GUARDIAN APPROVAL: IS REQUIRED.

Parent's / Guardian's Name

Phone or Email

Parent's / Guardian's Signature

Date ☐ *approved*

COUNSELOR APPROVAL: IS REQUIRED.

Counselor's Name

Phone or Email

Counselor's Signature

Date ☐ *approved*

Notes: