

## Scout Registration Form (Wolf, Bear, Webelos)

PACK NO.:  PACK COORDINATOR'S NAME

LAST NAME:  FIRST NAME:  MI:

DATE OF BIRTH:  AGE as of 6/9/08:  NICKNAME:

RANK SCOUT WILL BE WORKING TOWARDS SCHOOL YEAR 2008-2009: Wolf  Bear  Webelos I  Webelos II

SESSION ATTENDING: MORNING — 8:30 a.m. - 12:30 p.m.  EVENING — 4:30 p.m. - 8:30 p.m.

T-SHIRT SIZE: YOUTH SMALL  YOUTH MEDIUM  YOUTH LARGE  ADULT SMALL  ADULT MEDIUM  ADULT LARGE

One t-shirt is included with each Scout's Camp Registration Fee. Extra T-Shirts can be ordered at time of registration for an additional \$10.00. Please indicate quantity in the appropriate shirt size box.

STREET ADDRESS:  APT

CITY, ST ZIP:  EMAIL:

MOTHER / GUARDIAN: LAST NAME  FIRST NAME

HOME PHONE:  CELL PHONE:

FATHER / GUARDIAN: LAST NAME  FIRST NAME

HOME PHONE:  CELL PHONE:

**If Scout will be picked up by someone other than Mother, Father, or Guardian listed above, please provide contact information below.**

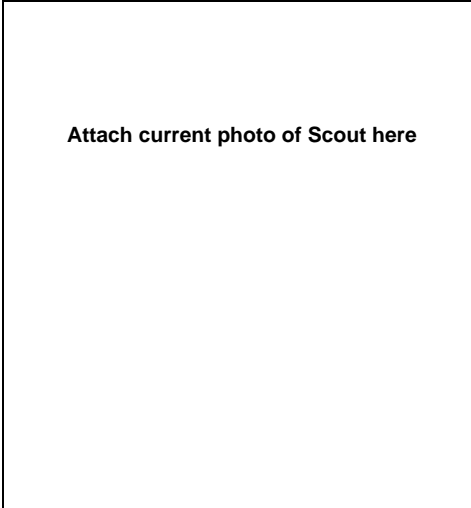
NAME #1:	<input type="text"/>	LOCAL PHONE:	<input type="text"/>
email	<input type="text"/>	CELL PHONE:	<input type="text"/>
NAME #2:	<input type="text"/>	LOCAL PHONE:	<input type="text"/>
email	<input type="text"/>	CELL PHONE:	<input type="text"/>

SCOUT MAY NOT BE PICKED UP BY:

Parent/Guardian Signature:  DATE:

Parent or Guardian **MUST** sign and date this form for application to be accepted

CAMP FEES:	<input type="checkbox"/>	Early Registration by 2/16/08	\$55.00
	<input type="checkbox"/>	Registration by 3/8/08	\$80.00
	<input type="checkbox"/>	Late Registration by 4/5/08	\$100.00



Please return this form, BSA Class 1 Medical form and your camp fees (please make check payable to Circle Ten Council) to your Pack Coordinator by:

**THIS FORM AND A BSA CLASS 1 MEDICAL FORM MUST BE COMPLETED FOR EACH CUB SCOUT PARTICIPANT**