

Cub Scout Day Camp 2009 Registration Form

Please fill out both sides of this form for each Scout. A BSA Class 1 Health Form must accompany each registration form.

ONLY ONE FORM PER PERSON.

PLEASE PRINT

CIRCLE ONE:	RANGERS (age 5 – 11)	TOT LOT (age 2- 4, MUST BE POTTY TRAINED)
NAME: _____	PACK # _____	
ADDRESS: _____	CITY: _____	ZIP: _____
HOME PHONE: _____	AGE: _____	BIRTHDATE: _____ GENDER: _____
GRADE COMPLETED AS OF JUNE 2009 _____		
SPECIAL PHYSICAL, MEDICAL, OR EMOTIONAL NEEDS: _____		
MOTHER/GUARDIAN'S WORK PHONE: () _____ CELL PHONE: () _____		
FATHER/GUARDIAN'S WORK PHONE: () _____ CELL PHONE: () _____		
<u>EMERGENCY CONTACT INFORMATION</u>		
Person(s) to contact if neither parent can be reached in an emergency (even if parent will be at camp). These people need to be available during camp hours and be aware that you have listed their names. <i>MUST</i> list at least one.		
NAME: _____	RELATIONSHIP: _____	
HM PH: _____	WK PH: _____	CELL PH: _____
NAME: _____	RELATIONSHIP: _____	
HM PH: _____	WK PH: _____	CELL PH: _____
PHYSICIAN'S NAME: _____		PHONE: _____
Who will pick this child up from camp?		
NAME: _____		PHONE: _____

AGREEMENT

I understand that camp rules have been established to ensure the fun and safety of all campers and staff. I have read the rules included with this registration packet. These rules will also be explained fully to campers on the first day of camp. Everyone present on campgrounds will be expected to abide by these rules.

I understand that I will be asked to pick up my child from the Ranger/TotLot area if their behavior endangers their safety and well being or of others.

I understand that I am expected to abide by the procedures established for the delivery and pick-up of campers. Campers should be picked up from the Ranger/TotLot program area immediately after the closing ceremonies each day. **A CAMPER MUST BE SIGNED IN & OUT OF THE RANGER/TOTLOT PROGRAM AREA EVERY DAY.** You must make verbal and visual contact with one of the adults in charge of the Ranger/TotLot program area whenever you are dropping off or picking up.

Signature of child

Date

Signature of Parent or Legal Guardian

Date

CONTINUED ON OTHER SIDE

3/30/2009

NAME: _____

PACK # _____

PLEASE ONLY ONE PERSON PER FORM

CIRCLE ONE:

RANGER (age 5 – 11)

TOT LOT (age 2- 4, MUST BE POTTY TRAINED)

REGISTRATION FEES AND T-SHIRTS

Must be received by May 14, 2009

T-shirts _____ (qty) @ \$9.00 each *Indicate size below* \$ _____

Make checks payable to your pack

TOTAL \$ _____

CAMP T-SHIRT SIZES

Please be sure of your sizing. You will be given ONLY the size you order, no exchanges. Please indicate total quantity including any extra shirt. **Youth XL & Adult Sm are the same size

Youth Sm (4-6) _____ Youth Med (8-10) _____ Youth Lg (12-14) _____ **Adult Sm _____ Adult Med _____ Adult Lg _____

CHECKLIST OF REQUIREMENTS FOR REGISTRATION

- Registration Form (this form)
- BSA Health & Medical Form (immunization dates required by State of Texas)
- Media Release form (not required if using the new BSA Health & Medical Form)
- T-shirt Fee (make checks payable to your pack)
- Submit above listed forms to your Pack. (**Do not** send registration forms to Circle Ten Council.)

DAY CAMP USE ONLY:

T-shirt fees paid \$ _____

Health and Medical form Signed Immunization dates Media Release

Total Amount Paid \$ _____

Check # _____ Amt. \$ _____ Cash Receipt # _____ Amt. \$ _____

CONTINUED ON OTHER SIDE

3/30/2009