

CUB SCOUT DAY CAMP “ADULT” REGISTRATION

*****Annual BSA Health & Medical Records Parts A&B MUST accompany EACH Registration*****

****FACE-TO-FACE YOUTH PROTECTION training must be completed****

PARTICIPANT INFORMATION:

Name: _____ Gender: _____ DOB: _____

Pack # _____

T-shirt size: ☐YS ☐YM ☐YL ☐AS ☐AM ☐AL ☐AXL ☐A2X ☐A3X

Adults get 1 shirt if they work the ENTIRE week. Extras are \$10, if available.

Extra t-shirts? _____ X \$10 = _____

Days I can work: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Scouts Name: _____ Rank: _____

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Email: _____ Address: _____

Home Phone: _____ Cell: _____

Emergency Contact: _____ Phone: _____

Where would you like to help at camp? (It is not guaranteed, but we will do our best!)

☐ Walker/Den Leader ☐ ME-TOOS! ☐ Pre-Camp (Before 8am) Set up ☐ Cleanup

☐ Camp Photographer ☐ Water/Trash ☐ Activity Leader/Teacher/Craft

Which child or pack would you prefer to be with? _____

Fees:

☐ \$10 additional t-shirt fee (optional)

Forms:

☐ Registration Form ☐ Face-to-Face Youth Protection

☐ BSA Health Form A&B ☐ Volunteer Information Sheet ☐ CPR

MAKE CHECKS PAYABLE TO CIRCLE 10 COUNCIL

Camp Director: Sarah Kirchmann 817-521-0134 sarahkirchmann@yahoo.com

Please turn in to your Pack Coordinator
before May 20th for the Early Bird Discount!