

CUB SCOUT REGISTRATION
GIVE FORM TO YOUR PACK COORDINATOR



Cub Scout Day Camp 2017

Camp Location: _____

Name _____
Parent/Guardian _____
Scout's birth date ____/____/____
Address _____
City/Zip _____
Telephone _____ Cell _____
Email _____
District _____ Pack # _____

All Scout and adult registrations and payment must be turned in to your pack. Packs will then register both Scouts and adults on a separate, single pack form with a pack check. The pack will also turn in the individual registrations, and medical forms to your District Day Camp Director.

The fee per Cub Scout is \$80 if received with the pack registration **on or before May 6th**, \$100 May 7 – 22, and \$110 after that. To see the refund policy, go to the Day Camp page at www.craterlakecouncil.org, then "Activities", then "Day Camp". T-shirts and projects cannot be guaranteed after May 22.

Questions?
www.craterlakecouncil.org, "Activities", then "Day Camp"

Day Camp Coordinator's Name _____

Is there someone **NOT** authorized to pick up my son? If yes, who? _____

Parent Signature _____ Date _____

**Rank in
September
2017**
(Circle one)

Tiger	Webelos 1
Wolf	Webelos 2
Bear	

Scout's T-Shirt Size (circle one)

Youth Small (8-10)	Youth Med (10-12)	Youth Large (14-16)	Adult Small	Adult Med	Adult Large
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Medical Information

Parts A and B of the new *Annual BSA Health and Medical Record* form are required for all those attending Day Camp (campers, adult volunteers and den chiefs). An exam by a physician is not required. The form may be downloaded from www.craterlakecouncil.org, then "Activities", then "Day Camp". When done, save it for future use, keep the original and submit a copy for camp use. Medical personnel ask that you please put dates on the immunization portion of the form, or for adults, writing "current" will suffice. **Tetanus information is especially critical.** A copy of your insurance card is also required, as stipulated in Part A. If not insured, write "None".