2014 Chappepeela District Cub Scout Day Camp

June 9 – 13, 2014

Deadline for registration is April 11, 2014

Pay before February 28, 2014 – Early Bird $ 100
After February 28, 2014 – cost will be $ 125

EVERYONE must turn in a BSA Medical Form.
There is a limit of 95 scouts.
Chappepeela District does not have a Tiger program at Day Camp.

Camp time: 8:00 am to 3:30 pm
Camp will be at Rosaryville Spirit Life Center, Ponchatoula.

Time: Drop-off will be from 7:30 am – 8:00 am. Pick up will be 3:30 pm – 4:00 pm.

Food: Lunch will be provided Monday – Friday. Parents will be provided with a menu via e-mail and at pre-camp check-in. Parents are responsible for packing their scout snacks and drinks. If your scout has a special diet, please contact the Camp Director with details.

Clothing: T-shirts will be issued to each Cub Scout, Volunteer, and Tot-Lot participant on Saturday, **June 7, 2014, from 9:00 am – 12:00 pm**. Shorts with pockets and belt loops are recommended. Closed-toed/closed-heel shoes (i.e. tennis shoes, etc.) (**No sandals or crocs)** and socks are required. Anyone arriving in anything other than closed-toed/closed-heel shoes will be sent home. Scouts should wear their bathing suit to camp every day. Bring a towel and change of clothes.

Label: Please put your scout's name on EVERYTHING they bring to camp, including their refillable water bottle. The scout's name should especially be on their camp T-shirt because when they are at the pool they will remove their shirt; however, if your scout wishes to wear a shirt in the pool they will need to bring an extra shirt.

Activities: All scouts will participate in Archery, BB's, crafts, nature, swimming, and sports.

Friday: Friday we will have our annual egg drop. Each scout, with an adult's assistance, should complete a 6" X 6" X 6" container with a raw chicken egg. The container will be dropped from about a height of a 2 story building. Parents, guardians, and family members are invited to attend the event from 2:00 pm to 4:00 pm.

Turn In: You can turn in registration, payment, and medical forms:
February 1, 2014, at Books A Million, Hammond Square Mall 9 am to Noon
February 6, 2014, at District Roundtable 7:00 pm
March 13, 2014, at District Roundtable 7:00 pm

Contact with questions:

Day Camp	Gay Nell Colvin	225-936-6361	gaynell210@gmail.com
Directors:	Brandi Freeman	225-305-4362	gatorbait0327@hotmail.com
	Charlene Hess	985-514-2320	creationsbycase@gmail.com
District Director:	Philip Territo	985-969-3048	Philip.territo@scouting.org

Volunteer Information

Day camp cannot happen if we do not have volunteers to assist the scouts with their fun learning experience. To volunteer, all adults and Boy Scouts must be registered with Boy Scouts of America.

Boy Scout volunteers must be 14 years of age. If a Boy Scout under the age of 14 wants to volunteer, their parent guardian or Scoutmaster must also volunteer and the Scout will be assigned to work with their parent, guardian, or Scoutmaster.

Uniform: If you volunteer full time (5 days, all day) you will receive a free t-shirt. If you volunteer part time you must purchase a t-shirt for $10.

MANDATORY STANDARD **All BSA registered day camp staff must wear the official camp T-shirt.**

Training: Staff orientation/training will be held on Saturday, May 17, 2014. Details will be e-mailed to all volunteers. **MANDATORY STANDARD**: All volunteers must attend orientation/training.

Set Up: If you can assist with set up, please be at Rosaryville on Saturday, June 7, 2014, for 9:00 am.

Please use the following as a guide to pick three areas that you are interested in working:

A. Anywhere I am needed	G. Drop Off/Pick Up	M. B.B. Asst.
B. Swimming	H. Asst. Swimming	N . Archery Asst.
C. Crafts/wood working	I. Sports	O. Wolf Den Leader
D. Asst. Crafts	J. Tot-Lot Leader	P. Bear Den Leader
E. Set Up/Take Down	K. Tot-Lot Asst	Q. Webelos 1 Den Leader
F. Asst. Den Leader	L. Nature	R. Webelos 2 Den Leader

BB instructor and Archery instructor must have a current BSA National Shooting Sports certificate.

We need licensed/trained people for: First Aid station and Lifeguard (We need 2 lifeguards).

To assist with the First Aid station, the adult must have one of the following current certifications or valid license:

Licensed physician	Licensed nurse practitioner
Nurse (RN, LPN, or LVN)	Licensed physician's assistant
Paramedic	Emergency Medical Technician (EMT)

Lifeguard must have a current certification. Additionally, the lifeguard must complete Safe Swim Defense and Safety Afloat on-line training and turn in completion certificates.

ISTROUMA AREA COUNCIL - CHAPPEPEELA DISTRICT
REGISTRATION FORM

2014 Cub Scout Day Camp Registration

Please fill out a separate registration form for each participant attending camp

Camper's Name: _____ Preferred Name: _____

Name is legal name that appears on scout's membership card.

Pack #: _____ District: _____ Birth Date: _____ Age: _____

Parent/Guardian Name: _____

Address: _____

City: _____ Zip Code: _____

Home Ph: _____Work Ph: _____Cell Ph: _____

Email: _____

SCOUT'S
CURRENT RANK: □ Tiger (1st) □ Wolf (2nd) □ Bear (3rd) □ Webelos I (4th)
At camp will be a: Wolf Bear Webelos I Webelos II

T-Shirt Information

One camp shirt is included with each paid scout registration and will be **the required uniform** of day camp. They must wear the shirt every day. Additional shirts may be purchased for $10 each.

Please Circle Shirt Size

YXS (2-4)	YS (6-8)	YM (10-12)
YL (12-14)	AS	AM
AL	AXL	A2X

Payment Summary

Early Bird (by Feb. 28th) $100	$ _____
Camp Fee (after Feb. 28th) $125	$ _____
Extra Shirt #_____ X $ 10	$ _____
Total Due	$ _____

Instructions:

- Fill this form out completely – each section is important
- Attach a BSA Health Form** with parts A and B completed
- Attach payment
- Submit to Council Office:
  Istrouma Area Council, BSA
  9644 Brookline Avenue
  Baton Rouge, LA 70809-1432
  FAX: 225-926-7552

****The health form can be found at www.iac-bsa.org under forms**

Refund Policy

1. Written refund requests will be considered only if received in the Pennington Scout Center ten (10) days prior to the beginning of camp. **2**. Written refund requests submitted after the event will be considered only for personal illness or family emergencies. No refund requests will be accepted after ten (10) days following the close of camp. **3**. A service charge of twenty-five percent (25%) of the full activity fee will be assessed on all refunds. **4**. Refund checks will be issued within 30 days following the close of camp. **5**. Fees are only transferrable within the same unit to a Scout not currently registered for the event.

ISTROUMA AREA COUNCIL-CHAPPEPEELA DISTRICT
REGISTRATION FORM

SIBLINGS CAN ONLY ATTEND CAMP ON DAYS THEIR PARENT/GUARDIAN IS VOLUNTEERING AT CAMP. Siblings must be under 12 years of age and must be potty trained. Sibling program includes crafts, other activities, lunch, and some snacks.

Sibling's Name: _____ Preferred Name: _____

Brother's Pack #: _____ District: _____Birth Date: _____ Age: _____

Parent/Guardian Name: _____

Address: _____

City: _____ Zip Code: _____

Home Ph: _____Work Ph: _____Cell Ph: _____

Email: _____

Full time volunteer - child care fee $25 and free t-shirt for sibling
Part time volunteer – child care fee $8 per day and $10 for t-shirt for sibling

Attending: Monday Tuesday Wednesday Thursday Friday All Week

T-Shirt Information

One camp shirt is included with full time volunteer and will be the required uniform each day of camp.
Additional shirts may be purchased for $10 each.

Please Circle Shirt Size

YXS (2-4) YS (6-8) YM (10-12)

YL (12-14) AS AM

Instructions:

- Fill this form out completely – each section is important
- Attach a BSA Health Form** with parts A and B completed
- Attach payment
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Payment Summary

Sibling Fee $8/day X ____ days $ _____
OR
Sibling Fee $ 25 for week $ _____

Shirt Fee _____ X $ 10 $ _____
(All week includes 1 shirt)

Total Due $ _____

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ISTROUMA AREA COUNCIL-CHAPPEPEELA DISTRICT
VOLUNTEER REGISTRATION FORM

2014 Cub Scout Day Camp Registration

Please fill out a separate registration form for <u>each</u> participant attending camp

Volunteer's Name: _____ Preferred Name: _____

Name is legal name that appears on your BSA membership card.

Pack/Troop #: _____ District: _____ Birth Date: _____ Age: _____

Address: _____

City: _____ Zip Code: _____

Home Ph: _____Work Ph: _____Cell Ph: _____

Email: _____

Days available: __All Week ___ Monday ___Tuesday ___Wednesday ___ Thursday ___ Friday

Times: ___All day or List _____

Registered w/ BSA _____ Youth Protection _____ Date_____

CPR certified _____ Date _____ First Aid _____ Date _____

Camp directors will assign volunteers. Please list three areas of interest. (See informational page for areas)

1. _____ 2._____ 3. _____

T-Shirt Information

One camp shirt is included with full time volunteer and will be the required uniform each day of camp.
Additional shirts may be purchased for $10 each.

Please Circle Shirt Size

YM (10-12) YL (12-14) AS

AM AL AXL 2XL 3XL

Instructions:

- Fill this form out completely – each section is important
- Attach a BSA Health Form** with parts A and B completed
- Attach payment
- Submit to Council Office:
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  FAX: 225-926-7552

**The health form can be found at www.iac-bsa.org under forms

□ Adult Leader Position: _____

□ Boy Scout Rank: _____

Payment Summary

Shirt Fee _____X $ 10 $ _____

Total Due $ _____

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