ADULT VOLUNTEER OR DEN CHIEF APPLICATION

ISTROUMA AREA COUNCIL/TUNICA DISTRICT

2014 Cub Scout Day Camp Registration

Please fill out a separate registration and medical form for <u>each</u> volunteer.

Thank you for supporting the Cub Scout Day Camp Program by volunteering your time.
A shirt will be provided for anyone who volunteers 3 or more days.

Waddill – June 2-6, 2014

Circle One: Youth / Adult Troop Number _____ T-Shirt Size: _____

Volunteer Name: _____ Age/DOB: _____

Address: _____

City: _____ Zip Code: _____

Phone (H): _____ (W): _____ (C): _____

Email: _____

Scout Name: _____ Relation to Scout: _____

I'm applying to help as a (please rank by preference with 1,2,3):

___ Den Leader ____ Asst. Den Leader _____ Arts & Crafts _____ Nature _____ Shooting Sports

___ Sports ____ Siblings _____ Den Chief _____ Other (wherever we need you)

Special Talents or Interests: _____

Days Attending:

Monday	Tuesday	Wednesday	Thursday	Friday
AM PM or ALL	AM PM or ALL	AM PM or ALL	AM PM or ALL	AM PM or ALL

Are you a BSA registered leader? Yes or No Current Position Held: _____

BSA Youth Protection Training completed? Yes or No Date Training Completed: _____

Are you CPR certified? Yes or No Date Certification Earned: _____

Scouting Experience (in years): As a Youth _____ As an adult _____

List any Day Camp Experience: _____

You must provide a copy of your Youth Protection and/or CPR cards!

All adults must be a registered member of the Boy Scouts of America

SIBLING APPLICATION

ISTROUMA AREA COUNCIL/TUNICA DISTRICT

2014 Cub Scout Day Camp Registration

Please fill out a separate registration form and medical form for <u>each</u> sibling.

Please note you must be a Volunteer in order for a sibling to attend camp. They can only attend Day Camp on the days that you volunteer.

Waddill – June 2-6, 2014

Name: _____ Age/DOB: _____ Gender: M or F

Volunteer Name: _____

Address: _____

City: _____ Zip Code: _____

Phone (H): _____ (W): _____ (C): _____

Email: _____

T-Shirt Information

One camp shirt is included with each paid sibling and will be the required uniform each day of camp.

Additional shirts may be purchased for $10 each.

Please Circle Shirt Size

Youth: YS (6-8) YM (10-12) YL (12-14)

Adult: Small Medium Large X-Large

Days Attending:

Monday Tuesday Wednesday Thursday Friday

ISTROUMA AREA COUNCIL/TUNICA DISTRICT
2014 Cub Scout Day Camp Registration

Waddill – June 2-6, 2014

Please fill out a separate registration form and medical form for <u>each</u> camper.

Camper's Name: _____ Nickname: _____

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

Parent/Guardian Name: _____

Address: _____

City: _____ Zip Code: _____

Phone (H): _____ (W): _____ (C): _____

Email: _____

My son would like to be in a DEN with: _____

Next school year (Fall 2014) my Scout will be a:

☐ Wolf ☐ Bear ☐ Webelos I ☐ Webelos II

If you are unsure, please indicate what grade your child will enter in the fall (2014): _____

<u>Instructions:</u>

- Fill this form out completely – each section is important
- Attach a BSA Health Form** with parts A and B completed
- Attach payment - Make checks payable to BSA
- Either Mail or drop off to
  Istrouma Area Council Office-BSA
  9644 Brookline Ave., Baton Rouge, LA
- Or FAX: 225-926-7552

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

<u>Refund Policy</u>

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.

<u>T-Shirt Information</u>

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

Please Circle Shirt Size	**YS (6-8)**	**YM (10-12)**	**YL (12-14)**				
	AS	**AM**	**AL**	**XL**	**2X**	**3X**	**4X**

Fee Schedule

Items	Number	Amount	Total
Scout		$80.00	
Sibling		$25.00	
Extra Shirt		$10.00	
Late Fee		$25.00	
Volunteer Discount		($10.00)	

Total _____

Volunteer discount only applies if volunteering 3 or more days and to only one scout fee

Late Fee starts April 1, 2014