

2017 Prairielands Council Day Camp Registration Form Camper

Note: This form must be submitted along with Parts A and B of the BSA Medical Form when registering for Day Camp

Contact Information (Please Print)

Pack # _____
 Scout Name _____ Home Phone (____) _____
 Father's Name _____ Day Phone (____) _____
 Mother's Name _____ Day Phone (____) _____
 Address _____
 City, State, Zip Code _____
 Email(s)[print clearly] _____

In case parents or guardian cannot be reached in an emergency, who else should be notified? This must be a local person who can pick up the Scout if necessary.

Name _____ Relationship _____ Day Phone(____) _____
 Name _____ Relationship _____ Day Phone(____) _____

Is there anyone who is NOT allowed to pick up your child from Day Camp (for example, a custody issue?)

Name(s) _____

Scout Rank in the fall: Lion Tiger Wolf Bear Webelos Arrow of Light

Camp Fees

Camp Drake (June 2-3)	
Saturday only at \$40.00	\$ _____
Overnight Camp at \$40.00	\$ _____
Late fee (after May 19,2017) \$10.00	\$ _____
Adult meal ticket(s) #_____ at \$10.00 ea	\$ _____
Tuscola Day Camp (June 16-17)	
Saturday only at \$40.00	\$ _____
Overnight Camp at \$40.00	\$ _____
Late fee (after May 19, 2017) \$10.00	\$ _____
Adult meal ticket(s) #_____ at \$10.00 ea	\$ _____
Urbana Day Camp (June 23-24)	
Saturday only at \$40.00	\$ _____
Overnight Camp at \$40.00	\$ _____
Late fee (after May 19, 2017) \$10.00	\$ _____
Adult meal ticket(s) #_____ at \$10.00 ea	\$ _____
Total Due	\$ _____
Less Council Campership (if any, contact Council office)	\$ _____

FOR OFFICE USE ONLY

Contact Information

Medical Form Attached

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