

LEWIS & CLARK CONTINGENT REGISTRATION

Name _____ Grade _____ Troop # _____

Mailing Address _____ Apt. _____

City _____ State _____ Zip _____

Phone # _____ Email _____

Parents Name _____

Please check all that apply

I'm coming back for a second week of camp (\$45 discount).

I can't attend with my Troop at their regularly scheduled time.

Registration

The registration fee is \$175.00 per participant or \$130.00 if this is your second time at Lewis & Clark in 2009. Please send half the fee with this form. The remaining half will be due by July 10th.

Please include a BSA Medical Health Record with registration. Parts A, B, and C need to be completed and signed.

Amount enclosed \$ _____

Permission

My son has my permission to attend Lewis & Clark Scout Camp with the Sioux Council Contingent during the week of July 19th through July 25th, 2009.

Parents Signature

Date

I recommend the above mentioned Scout to attend camp with the Lewis & Clark Sioux Council Contingent.

Scoutmasters Signature

Date