

2009 DAY CAMP PACK REGISTRATION FORM

FOR TIGER CUBS, CUB SCOUTS, WEBELOS, & ADULTS REGISTRATION WILL NOT BE COMPLETE WITHOUT MEDICAL RECORD CLASS 1 FROM ALL PARTICIPANTS AND T SHIRT SIZE FOR EACH BOY.

Instruction: Day Camp Coordinators please use this sheet and attach all required forms (B,C,D). Please feel free to copy this form or Visit gpc-bsa-org to download one. If attending another districts day camp please contact that director. If you have any questions please contact the Camp Director(s) or call 412-325-7964.

District _____ **Pack** _____ **Camp Date** _____ **Camp Location** _____

Day Camp Coordinator or Cubmaster _____

Address _____

City _____ Zip _____ Email _____

Day Phone _____ Evening Phone _____ Cell _____

YOUTH REGISTRATION

Rank	Name	Phone	Grade Entering 9/2009	Medical Record	T-Shirt Size
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

ADULT REGISTRATION

Leadership Position	Name	Phone	Days Attending	Medical Record	T-Shirt Size*	Paid
1						
2						
3						
4						
5						

REMEMBER: TWO ADULTS MUST BE PRESENT WITH TIGER CUBS, CUB SCOUTS AND WEBELOS SCOUTS AT ALL TIMES.

*** THERE IS NO FEE FOR PARENTS/LEADERS ATTENDING DAY CAMP EXCEPT FOR THE PURCHASE OF THE T-SHIRT.**