

Cub Scout Day Camp
Registration Form
July 21-24, 2015

NOTE: Completed Health forms MUST be turned in with this registration form and payment. Incomplete forms will be returned.

Scout Name: _____

Pack: 542 Council: Pathway to Adventure District: Thunderbird

Camp Town: MERRILLVILLE

Grade Scout is entering in the fall: _____

Cub Scout Rank in the Fall? (please circle): **Tiger** **Wolf** **Bear**
Webelos **Webelos II**

Scout's T-Shirt Size (Please Circle)

Youth Medium

Youth Large

Adult Small

Adult Medium

Adult Large

Adult XL

I agree to allow pictures to be taken of me or my child(ren) to be used to promote Day Camp & Cub Scouting:

YES

NO

I am available to be a Pack Day Camp Walker for the following days (please circle days available):

Tuesday

Wednesday

Thursday

Friday

Please Print:

Parent/Guardian Name: _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

Parent/Guardian Signature: _____

Date: _____