

# CUB SCOUT DAY CAMP REGISTRATION FORM

**PLEASE NOTE: ALL FORMS – INCLUDING THE HEALTH FORMS -- MUST BE COMPLETED BEFORE REGISTRATION WILL BE ACCEPTED! PAYMENT MUST ACCOMPANY REGISTRATION.**

Please return completed registration forms and health forms for Cub Scout & Adult volunteers to the Midland or Odessa Scout Service Centers by due dates to avoid late fee. Please note, the Odessa office cannot receive mail at their location.

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Scout Name \_\_\_\_\_ Pack \_\_\_\_\_ Rank \_\_\_\_\_  
District Attending (check):     Big Bend     Chaparral     Comanche Trail/Sandhills     Lone Star     Sand Hills

**Tiger Cub Adult Partner Name:** \_\_\_\_\_  
*NEW: BSA Standards requires an Adult Partner accompany Tiger Cubs. There will be a \$10 fee for the adult.*

Grade 2009-2010 School Year \_\_\_\_\_ Home Phone Number \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Parents Names \_\_\_\_\_ Day Phone \_\_\_\_\_  
E-Mail Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

Cub Scout's T-shirt Size (Please circle):    YS    YM    YL    AS    AM    AL    AXL    (Must wear to camp every day.)

Fee Calculation:    Registration Fee:    \$ \_\_\_\_\_  
                          \$10 Adult Tiger Partner Fee    \$ \_\_\_\_\_  
                          Extra T-Shirts @ \$10 each    \$ \_\_\_\_\_  
                          Adult Leader Discount -- \$10 per full-time adult leader on staff for all 4 days \$ \_\_\_\_\_  
**Excludes Tiger Partners. Discount for only one child.**  
                          TOTAL AMOUNT ENCLOSED    \$ \_\_\_\_\_  
                          (Registration and T-Shirts)

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**ADULT VOLUNTEER INFORMATION**

Volunteer Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Please fill out and attach a Volunteer Leader form and completed Health Form. Also included completed Information Forms and Health Forms for all children who will be in the Tot Lot. The Tot Lot is only available to the other children of Adult Volunteers while they are at Day Camp.

All Volunteers must be registered Scouts. Please turn in a completed Scout application form if you are not already registered.

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**BEHAVIOR AGREEMENT & RELEASE**

I UNDERSTAND THAT WHILE ATTENDING Day Camp as a Cub Scout, any actions or behavior deemed inappropriate will be subject to immediate dismissal from the Camp with no refund on fees paid. This is to be determined by the Camp Director, Program Director, or Camp Administrator. Further, I release and hold harmless Buffalo Trail Council, Boy Scouts of America, facility providers, and volunteer leaders from all liabilities, claims, suits and/or damages for injuries to any person or property from my son's participation in Cub Day Camp.

I also hereby give permission to the Buffalo Trail Council (BTC), Boy Scouts of America, to use and publish any photographs taken of my child or myself and I hereby release BTC from any and all liability from such use and publication and I specifically waive any right to any compensation I may have for any of the foregoing.

**Cub Scout:**  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Parent or Guardian for Cub Scout & Boy Scout:**  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# ADULT, BOY SCOUT & VENTURE CREW VOLUNTEER REGISTRATION FORM

**PLEASE NOTE:** ALL FORMS – INCLUDING THE HEALTH FORMS -- MUST BE COMPLETED BEFORE REGISTRATION WILL BE ACCEPTED! PAYMENT MUST ACCOMPANY REGISTRATION.

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**Volunteer Name** \_\_\_\_\_ **Pack** \_\_\_\_\_ **Position** \_\_\_\_\_

District Attending (check):    Big Bend    Chaparral    Comanche Trail/Sandhills    Lone Star    Sand Hills

Cub Name \_\_\_\_\_ Home Phone Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Availability:    Full Time    Part Time – Please indicate times available \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Adult T-shirt Size (Please circle):   AM   AL   AXL   AXXL   AXXXL   (Must wear to camp every day.)

T-shirts are provided to Volunteer Leaders who will be at Day Camp on a full-time basis for all four days. Extra T-shirts are available for \$10 for all sizes.

## **VOLUNTEER INFORMATION**

Please indicate the areas you would prefer to work. We will try to honor your preferences but they are not guaranteed.

#1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_

Please indicate level of Training (please circle):   CPR Certification   First Aid   Youth Protection   New Leader Essentials

All Volunteers must be registered Scouts. Please turn in a completed Scout application form if you are not already registered.

## **TOT LOT INFORMATION**

Please indicate the names and ages of your children who will be in the Tot Lot. Health Forms and Information sheets for each child must also be completed and turned in with your registration. The Tot Lot is only available to the other children of Adult Volunteers while they are at Day Camp.

#1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_

## **BEHAVIOR AGREEMENT & RELEASE**

I UNDERSTAND THAT WHILE ATTENDING Day Camp as a volunteer leader, any actions or behavior deemed inappropriate will be subject to immediate dismissal from the Camp. This is to be determined by the Camp Director, Program Director, or Camp Administrator. Further, I release and hold harmless Buffalo Trail Council, Boy Scouts of America, facility providers, and volunteer leaders from all liabilities, claims, suits and/or damages for injuries to any person or property from my participation in Cub Day Camp.

I also hereby give permission to the Buffalo Trail Council (BTC), Boy Scouts of America, to use and publish any photographs taken of my child or myself and I hereby release BTC from any and all liability from such use and publication and I specifically waive any right to any compensation I may have for any of the foregoing.

### **Volunteer Leader:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Parent or Guardian for Cub Scout & Boy Scout:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_