

TWIN VALLEY COUNCIL ~ 2008 DAY CAMP REGISTRATION

"Knights of the Roundtable"

- ◇ To register a youth for any of the Twin Valley Council Day Camps, complete the registration below and the health form found on reverse side. This camp is open to all registered boys who have completed grades K – 4 by June 2008.
- ◇ All adults attending camp must also complete the appropriate health form on reverse side.
- ◇ Tiger Cubs (Scouts beginning 1st grade fall of 2008) require an adult partner to attend with them.
- ◇ **All Scouts must register with their Pack. Individual registrations are not accepted.**

Youth Name _____ Pack # _____ Grade Fall 2008 _____

Address _____ City _____ Zip _____

Phone _____ Email Address for registration confirmation message _____

CUB SCOUT DAY CAMPS

FOR CUB SCOUTS WHO HAVE COMPLETED

K – 4TH GRADES BY JUNE 2008.

Please indicate which Day Camp you wish to attend.

- _____ June 9 – 10 McGowan's Farm, Mankato
- _____ June 12 – 13 Norseland Scout Camp, St. Peter
- _____ June 16 – 17 Cedar Point Scout Camp, Fairmont
- _____ June 19 – 20 Edge Water Park, Albert Lea

Registration Fee if **registered by May 9th**

\$30 per boy, includes T-shirt.

Registration Fee after May 9th

\$35 per boy, **NO** T-shirt included.

Adults attend at no charge.

NO CHILD WILL BE DENIED A CAMPING
EXPERIENCE DUE TO FINANCIAL ISSUES.
Contact your Cubmaster for more information.

T-SHIRT INFORMATION – Included in **ON TIME** registration (by May 9th) is one Day Camp T-shirt for the youth.

Please indicate size.

Youth Sizes: ___ Small ___ Medium ___ Large

Adult Sizes: ___ Small ___ Medium ___ Large ___ XL ___ 2XL ___ 3XL

Additional T-shirts may be ordered for \$10 each. Please indicate size and quantity.

Include additional \$10 payment for each T-shirt ordered.

Youth Sizes: ___ Small ___ Medium ___ Large

Adult Sizes: ___ Small ___ Medium ___ Large ___ XL ___ 2XL ___ 3XL

PHOTO RELEASE: I hereby assign and grant to the Boy Scouts of America the right and permission to use and publish the photographs/film/video tapes/electronic representations and/or sound recordings made during my child's visit to the Twin Valley Council Cub Scout camp listed above, and I hereby release the Boy Scouts of America from any and all liability from such use and publication.

I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage and/or distribution of said photographs/film/video tapes/electronic representation and/or sound recording without limitation at the discretion of the Boy Scouts of America and I specifically waive any right to any compensation I may have for any of the foregoing.

Parent's signature _____ Date _____

MY SON HAS PERMISSION TO PARTICIPATE IN BB GUN ACTIVITIES _____ Yes _____ No

(Very important! Your son can only be part of the BB gun activity if you give this written permission.)

Parent Signature _____ Date _____

This is a Cub Scout experience only.
No siblings or non-Cub Scout youth should attend.

Name of adult attending camp _____