

TWIN VALLEY COUNCIL ~ 2011 DAY CAMP REGISTRATION

- ◇ 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 2011.
- ◇ All adults attending camp must also complete the appropriate health form on reverse side.
- ◇ Tiger Cubs (Scouts beginning 1st grade fall of 2011) require an adult partner to attend with them.
- ◇ **All Scouts must register with their Pack. Individual registrations are not accepted.**

CUB SCOUT DAY CAMPS

FOR CUB SCOUTS WHO HAVE COMPLETED K – 4TH GRADES BY JUNE 2011.
Please indicate which Day Camp you wish to attend.

_____ June 10 - 11 Cedar Point Scout Camp, Fairmont
_____ June 16 - 17 Norseland Scout Camp, St. Peter
_____ June 23 - 24 Edge Water Park, Albert Lea
_____ July 22 - 23 McGowan's Farm, Mankato

Registration Fee if **registered by May 6th**
\$30 per boy, includes T-shirt.

Registration Fee after May 6th
\$35 per boy, **NO** T-shirt included.

Adults attend at no charge.

Yes! Sign Us Up!

Youth Name _____ Pack # _____ Grade Fall 2011 _____

Address _____ City _____ Zip _____

Email Address for registration confirmation message _____

PHONE NUMBER WHERE PARENT CAN BE REACHED WHILE CHILD IS AT CAMP _____

Adult registering for camp _____

T-SHIRT INFORMATION – Included in **ON TIME** registration cost (by May 6th) is one Day Camp T-shirt **for the youth**.

Please indicate size.

Youth Sizes: ___ Medium ___ Large Adult Sizes: ___ Small ___ Medium ___ Large

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: ___ Medium ___ Large x \$10 each = \$ _____

Adult Sizes: ___ Small ___ Medium ___ Large ___ XL ___ 2XL ___ 3XL x \$10 each = \$ _____

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 may attend.