Los Padres Council Scouts BSA

# Youth Registration

**Cub Scout Day Camp 2019**

LDS Church

1020 Creston Rd, Paso Robles, CA 93446

## Monday June 17 through Friday June 21, 2019 8:30am-3:00pm (M-Th)

## 10:30 – 7:00 pm (Family Potluck Dinner 4pm Friday)

$150 on or BEFORE May 26, 2019; $175 AFTER May 27, 2019;

($125.00 if parents volunteer all 5 days, save $5 per day)

***Last day to register is June 5, 2019***

***Please make checks out to : LPCBSA***

Pack#\_\_\_\_\_\_\_\_\_\_\_\_ Pack Unit Coordinator \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Scout’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nickname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade\*\* (fall 2019) \_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_ Birth Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## \*\*Den Determined by Fall 2019 Grade level: K or under 1st 2nd 3rd 4th 5th

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_, Zip Code: \_\_\_\_\_\_\_\_\_

Parent Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(By signing, you are stating that your child is registered with Cub Scouts. Should they not be, you are agreeing that the Pack has your permission to register them into their pack and you will agree to pay the pack the appropriate registration and unit fees.)

Parent / Guardian #1

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Best Phone #1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Best Phone#2\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent / Guardian #2

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Best Phone #1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Best Phone #2 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Circle T-Shirt size for youth: SM (6-8) MD (10-12) LG (14-16)

## ADULT Sizes S MD LG XLG XXLG

Los Padres Council Scouts BSA

Anything we need to know about your Cub Scout to provide them with the best possible camping experience?

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Yes, I would like to help at Day Camp, please contact me.

I am available: All days\_\_­\_\_ Mon. \_\_\_­\_\_ Tues. \_­­­\_­­­\_­­­­­­ Wed. \_\_\_\_ Thurs. \_\_\_\_ Fri. \_\_\_\_

**Reduced registration fee available – Save $5 per day**

### **Complete volunteer forms. (Adult Application)**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you are volunteering at Day Camp, we provide a tot-lot for younger siblings of scouts. Would you need this service? **Y N** (please fill out additional registration for your child to participate)

Permission/ Waiver

S. 12552: Furnishing Firearms to Minors under 18 without permission of parent-- Every person who furnishes any firearm, air gun, or gas-operated gun, designed to fire a bullet, or metal projectile, to any minor under the age of 18 years, without an express or implied permission of the parent or legal guardian of the minor is guilty of a misdemeanor.

I give permission for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to use a firearm as described above.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated: \_\_\_\_\_\_\_\_\_\_\_ Unit: \_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Jeanne Gard 805-238-0175, [daycamp19@gmail.com](mailto:daycamp19@gmail.com)

Or Amanda Lamar 805-610-1551, [daycamp19@gmail.com](mailto:daycamp19@gmail.com) with any questions.

Please provide this form to your Unit Coordinator along with the health and medical record form parts A & B and all other applicable forms to:

Jeanne Gard

320 Melody Dr. Paso Robles, CA 93446

Or to your Unit Coordinator