Istrouma Area Council
Bogue Tuchenna District
2010 Cub Scout Day Camp
Five Lakes Campground – Bush, LA
Boy Scouts of America

GATORBITE

Non-scout registration for Volunteers' Children
AGES 3-13

Fill out current Pack Info:

Pack of Scout_____
Age of Gatorbite_____
Male or Female
(Circle)

GATORBITE'S LAST NAME **GATORBITE'S FIRST NAME**

PARENTS' EMAIL

MOTHER'S LAST NAME **MOTHER'S FIRST NAME**

HOME PHONE # **CELL PHONE #** **WORK PHONE #**

FATHER'S LAST NAME **FATHER'S FIRST NAME**

HOME PHONE # **CELL PHONE #** **WORK PHONE #**

PLEASE CIRCLE WHICH SESSION(S) YOU AND YOUR CHILD WOULD LIKE TO ATTEND.
PLEASE NOTE THAT THE GATORBITE PROGRAM IS FOR CHILDREN WHOSE PARENTS ARE VOLUNTEERING AT CAMP.
GATORBITES CANNOT BE LEFT AT CAMP WITHOUT A PARENT. GATORBITES MUST BE POTTY TRAINED.

PARENT VOLUNTEERS NAME: _____ **DAY PHONE#:**_____

WEEK # 1: JUNE 7 –11 **WEEK # 2: JUNE 14 – 18** **BOTH WEEKS**

ALL WEEK or Days: Monday Tuesday Wednesday Thursday Friday

GATORBITE REGISTRATION FEE: **$30 PER WEEK =** _____

PLEASE CHECK WITH YOUR PACK DAYCAMP CHAIRPERSON FOR *PACK* REGSITRATION DEADLINE

WE WILL NOT ACCEPT REGISTRATIONS AFTER APRIL 14, 2010

PLEASE CIRCLE SCOUT'S T-SHIRT SIZE**: (ONE (1) SHIRT INCLUDED PER REGISTRATION FEE)**

Y-S (6-8) **Y-M (10-12)** **Y-L (12-14)** **ADULT-S** **ADULT-M** **ADULT-L**

EXTRA SHIRTS AVAILABLE FOR $10 EACH # EXTRA SHIRTS _____ X $ 10 = _____

MAKE CHECKS PAYABLE TO YOUR PACK. **TOTAL DUE =** _____
TURN IN FORMS AND MONEY TO YOUR CUBMASTER
OR PACK DAY CAMP COORDINATOR. DATE PAID _____

REFUND POLICY:

1. Written refund request will be considered only if received in the Pennington Scout Center ten (10) days prior to the beginning of camp.
2. Written refund requests submitted after the event will be considered only for personal illness or family emergencies.
3. No refund request will be accepted ten (10) days after the close of camp.
4. A service charge of 25% of the full activity fee will be assessed on all refunds.
5. Refund checks will be issued within 30 days following the close of camp.
6. Fees are transferable within the same unit to a Scout not currently registered for the event.

REGISTRATION WILL NOT BE COMPLETE WITHOUT:

___ COMPLETED REGISTRATION FORM
___ MEDICAL FORM: PART A & B (if necessary)
___ EMERGENCY CONTACTS
___ PAYMENT
___ ADULT VOLUTEER REGISTRATION

QUESTIONS? Email: johannahowell1995@yahoo.com