

TROOP# DISTRICT COUNCIL TOWN

SESSION ATTENDANCE

Indicate 1st choice

Week 1 - June 7-13 Week 4 - June 28 - July 4
Week 2 - June 14-20 Week 5 - July 5-11
Week 3 - June 21-27 Week 6 - July 12-18

ESTIMATED ATTENDANCE

Number of Scouts
Number of Leaders M F

NOTE: A \$100 reservation deposit must accompany this reservation.
Check enclosed made payable to Mid-America Council, B.S.A.
Charge our Unit Prepaid Account.
Rollover from 2008
Charge credit card: name on card card # 3 digit security code exp. date signature

THE UNIT UNDERSTANDS AND AGREES THAT:

- 1. Acceptance of your \$100 secures your choice of sessions at camp for the number of Scouts and leaders indicated above.
2. The \$100 reservation fee is NOT refundable or transferable if the unit fails to attend camp.
3. Two qualified adult leaders, one of whom is at least 21 years of age, the second leader at least 18 years of age, will be in attendance with each troop at all times during the entire period that the troop is in camp.
4. While it is possible to request sharing a campsite with a specific troop, both units must so request and make their reservations at the same time.
5. Health and accident insurance is an individual and parental responsibility and is not provided by the Mid-America Council as part of the camp fee.
6. Campsite assignments will be based on a first come first served basis.
7. Current registrations and a map of Camp Cedars can be found on the web at www.mac-bsa.org.
8. The following campsites have platforms & tents (campsite capacity): Seline (44), Arapaho (44), Blackfoot (44), Four Eagles (46), Kiowa (42), Doc R (44), Mandan (48), Gratton (46), Haddix (46), Boyer (40), Hayes (48), Miller (24), and Berek (48).
9. Troops provide their own tents in the following campsites (campsite capacity): 3 Feathers (20) & Heritage (25)

List five different campsite selections in order of preference.

1. 2. 3. 4. 5.

Signature of Scoutmaster / Varsity Coach

Signature of Committee Chairman

Please put the contact information for the person in the unit who should receive Camp Cedars 2009 information.

NAME POSITION IN UNIT

ADDRESS HOME PHONE

CITY STATE ZIP CODE WORK PHONE

E-MAIL ADDRESS CELL PHONE