

Tie Down your Campsite NOW for 2009

Please reserve a campsite for Troop # _____ of
_____ Council *

1st Choice: _____

2nd Choice: _____

3rd Choice: _____

.... for the week of: (Circle One)

June 14-20

June 21-June 27

July 5-11

July 12-18

Expected Camp attendance: Youth _____ Adults _____

Camp Coordinator:

Name: _____ Address: _____

City: _____ State: _____

Zip: _____

Phone: (H) () _____ (B) () _____

E-Mail _____

* Council City _____ and Council
Number _____ for out of Council Troops.

Non-Refundable Campsite Deposit = \$100.00 **

Council Service Center Use Only: Date of Site Deposit: _____ Amount of Deposit:

\$ _____ Camp Leader Guide Sent: _____

** Note both the form and the deposit are required to reserve a campsite