



**Boy Scouts of America**  
**Troop 29 Summer Camp 2010**  
**Hawk Mountain Adult Activity Registration Form**

**Adult Name:** \_\_\_\_\_

**Activity Title:** Summer Camp 2010 at Hawk Mountain

**Activity Location:** Base Camp: Hawk Mountain Scout Reservation – Reading, PA  
 Boots and Paddles: Appalachian Trail and Upper Schuylkill River

**Activity Dates:** June 20 -26, 2010

**Cost per Person (CHECK ONE):**

_____	Base Camp:	\$135 (price includes \$30 deposit fee)
_____	Base Camp + COPE:	\$151 (price includes \$30 deposit fee)
_____	Boots and Paddles:	\$395 (price includes \$30 deposit fee)

**Gathering/Returning Location:** Red Clay Creek Presbyterian Church

**Gathering Date & Time:** June 20, 2010 - Time TBD

**Returning Date & Time:** June 26, 2010 - Time TBD

**Deadline to Register:** February 1, 2010 – with \$30 Non-Refundable deposit

**Deadline for Final Payment:** May 10, 2010 – see fee schedule on Activity Sheet

Be sure to read the Activity Sheet for program details, logistics information, and more.

**Medical Information:** TO BE SIGNED BY ADULT

(check applicable boxes and provide information where requested)

- There have been NO CHANGES in this Adult's medical facts, history or insurance since the last health forms submitted.
- There HAVE BEEN SOME CHANGES in this Adult's health form information; I have noted those changes on this form.
- This Adult will need medications during this activity. Adult medication will be turned into the Tour Leader (or designee).

**Adult Signature:** \_\_\_\_\_ **Print name:** \_\_\_\_\_

**Travel Information:**

Will this Adult be traveling with the group? (If "no", provide Special Arrangements information below)

From gathering point to Activity?  Yes  No      Returning from Activity back to gathering point?  Yes  No

- I will volunteer to drive and transport Scouts; I can transport \_\_\_\_\_ people, including myself
- I will volunteer to tow the equipment trailer

**Special Departure Arrangements:** (only complete this section if applicable)

- This Adult will not travel to the activity with the group — he/she will go directly to the activity as follows:

Adult travel plans: \_\_\_\_\_  
 Adult will arrive at the activity on (day) \_\_\_\_\_ at (time) \_\_\_\_\_

**Special Return Arrangements:**

- Adult will not travel back from the activity with the group — he/she will depart from the activity as follows:

Adult departure plans: \_\_\_\_\_  
 Adult will leave the activity on (day) \_\_\_\_\_ at (time) \_\_\_\_\_

**Financial Direction:** Please indicate preferred payment method for this trip below.

- Check Attached       Cash Provided       Invoice Adult Billing Account      Adult Initials: \_\_\_\_\_



**Registration Use Only:**

Rec'd On: ___/___/____	Rec'd By: _____	Notes:
Departure Check-In: <input type="checkbox"/> By: _____	Signed Out By: _____	
Medicines Checked In: <input type="checkbox"/> Yes By: _____ <input type="checkbox"/> No		