

# 2011 CAMP BOYHAVEN SUMMER RESIDENT CAMP SIBLING REGISTRATION FORM

## SIBLING INFORMATION:

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Pack Number: \_\_\_\_\_ District or County: \_\_\_\_\_  
Parent/Guardian Name(s): \_\_\_\_\_  
Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_  
Cell Phone: (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

**Cub Weekend Camping:**     \_\_\_ July 8<sup>th</sup> to 10<sup>th</sup>  
                                      \_\_\_ July 22<sup>nd</sup> to 24<sup>th</sup>

**Webelos Camping :**     \_\_\_ July 14<sup>th</sup> to 17<sup>th</sup>  
                                      \_\_\_ July 28<sup>th</sup> to 31<sup>st</sup>  
                                      \_\_\_ Aug 4<sup>th</sup> to 7<sup>th</sup>

\_\_\_ \$ 50 Deposit (Due upon registration)  
\_\_\_ \$ 165 Regular Fee  
\_\_\_ \$ 215 Late Fee (after 5/1)

\_\_\_ \$ 50 Deposit (Due upon registration)  
\_\_\_ \$ 205 Regular Fee  
\_\_\_ \$ 255 Late Fee (after 5/1)

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## PAYMENT INSTRUCTIONS

APPLICATION FORMS AND CHECKS (MADE PAYABLE TO "YOUR PACK") SHOULD BE SUBMITTED TO THE PACK CAMPING COORDINATOR. THE PACK SHOULD SUBMIT ONE CHECK TO THE COUNCIL WITH ALL THE FORMS.

## CAMP BOYHAVEN SIBLING POLICY

*Each Pack should decide whether to allow a registered Cub's siblings to attend Resident Overnight Camp with the Cub's adult.*

Packs that allow siblings to attend the camping sessions must abide by the following conditions.

1. The sibling has to be a sister or younger brother
2. The Camp Staff and Den Leaders have no supervisory responsibility for the sibling. The parent must supervise the sibling at all times.
3. Completed medical forms still need to be turned in.
4. Swim tests are mandatory for anyone wanting to use the Waterfront. The sibling could swim only if supervised one-on-one by their parent.