



Cub Scout Day Camp
Adult Registration Form
June 5-9, 2016

Name: _____ Pack: _____

Mailing Address: _____ City/Zip _____

Email Address: _____ Cell Phone: _____ Work Phone: _____

The Registration Staff will place volunteers where needed. If possible we will try to place the volunteer in the position requested. Some areas require certification. Every Adult must have health forms A and B along with being a registered adult.

- | | |
|--------------------------|----------------------|
| _____ Walking Den Leader | _____ Crafts |
| _____ Trading Post | _____ Archery |
| _____ Small Fry | _____ BB Guns |
| _____ Activities | _____ Outdoor Skills |
| _____ Water/Lunch Helper | _____ Games |
| _____ Camp Medic/Nurse | _____ Pool |

Comments: _____

Please keep in mind it may not be possible to place all parents with their own Scout; there are many areas that need volunteers.

If you are a walking den leader do you want your soon in your den? ___ Yes ___ No

Son's Name: _____ Pack _____

T-shirt Size: This will be your Day Camp Uniform to be worn each day.

_____ Adult Small _____ Adult Medium _____ Adult Large _____ Adult XL _____ Adult 2XL