



Provisional (individual) Camper

A Provisional (individual) Camper is a Scout attending camp who is not signed up with a summer camp charter den.

Scout's Name _____ Pack # _____ District Name _____

Grade Sept '10 _____ Rank Sept '10 _____ Date of Birth _____ Special Needs _____

Address _____ Town _____ State _____ Zip _____

E-mail _____ Phone # Home _____ Work _____ Cell _____

Emergency Contact _____ Phone _____

	Shirt Size	circle choice	Day Camp Only		
Youth /Med	Youth/Large	Adult /Small	Adult/Med	Adult/Large	Adult/XL

Check the Camp Session Your Scout will attend

*WEBELOS RESIDENT — 6 days	7/4-10	7/11-16	7/18-23	7/25-30	8/1-6	8/8-13	8/15-20
Webelos Resident -- Tadmá							
Webelos Resident -- Workcoeman							
Webelos Resident -- Mattatuck							
Webelos Resident -- Webster							
*CUB ADVENTURE — 6 days	7/4-10	7/11-16	7/18-23	7/25-30	8/1-6	8/8-13	8/15-20
Cub Adventure -- Tadmá							
*CUB EXPERIENCE — 3 days		7/8-10			7/30-8/1	8/6-8	
Cub Experience -- Tadmá							
Cub Experience -- Webster							
CUB/FAMILY OVERNIGHT		7/10-11	7/17-18	7/24-25	7/31-8/1		
Cub/Family Overnight -- Tadmá							
Cub/Family Overnight -- Mattatuck							
Cub/Family Overnight -- Webster							
DAY CAMP	7/5-9	7/12-19	7/19-23	7/26-30	8/2-6	8/9-13	8/16-20
Day Camp -- Wakenah/Tadmá							
Day Camp -- Mattatuck							
Day Camp -- Middletown							
Day Camp -- Akela/Webster							
Day Camp -- Martin Park							
Day Camp -- Clatter Valley							
Day Camp -- Shoreline							
Day Camp -- Sunrise							
Day Camp -- Workcoeman							
TWI-LITE						8/11-13	
Twi-Lite -- Paige Park							

Fees For Provisional Campers

By 5/14 after 5/14

Webelos Resident	\$350	\$375
Cub Adventure	\$350	\$375
Cub Experience	\$185	\$210
Day Camp	\$205	\$230
Wakenah only	\$215	\$240
Twi-lite Camp	\$40 per Scout	

Cub/Family Overnight \$40 per person \$120 max per family

Camp Fee _____

Campership _____

*Adult Fees _____

Total Enclosed _____

Enclose Campership Acceptance Letter

**CRC BSA, 60 Darlin St,
PO Box 280098, East Hartford, CT
06128**

PHOTO RELEASE: Connecticut Rivers Council may take pictures and/or videos for use as camp promotional materials for Scout camps and programs, I realize

that my child's likeness and/or mine may appear in this material. If you do not agree notify the Connecticut Rivers Council, 60 Darlin St, POB 280098, East Hartford, CT 06128; Attn: Camping.

REFUND NOTICE: Partial refunds for Scouts not attending camp will be given only if the notification is given to the Connecticut Rivers Council in writing at least 14 days prior to the scheduled arrival date at camp. There will be no refunds for cancellations within two weeks of camp attendance except for medical reasons or summer school attendance. Partial refunds for cancellations due to medical reasons will require a doctor's note. Summer school will require a note from the school. The non-refundable/transferable \$25 save-a-spot fee will not be returned. After June 15, contract commitments increase all non-refundable fees. Requests for partial refunds must be made no later than August 31. Requests made after that date will not be considered.

MEDICAL FORMS: Medical forms are required for every person in camp, and a separate form is required for each session attended. The council may keep these medical forms. Be sure to make copies of the form before you come to camp. Be prepared to leave a copy of the medical form at camp, keep an original in a safe place; it can be used again. Copies cannot be made at camp, and they cannot be provided at a later time. **Attendance at camp requires a Medical form. A medical exam is require annually.**

*** I would like to attend (Webelos Resident, Cub Adventure, Cub Experience) camp with my Scout. I under stand the adult fee is \$15 per day to cover food cost.**

Parent/Guardian (Print) _____ Parent/Guardian (Signature) _____