

Check In Form and / or Pay at the Camp for USA Units - Form 1B

→ **As soon as you arrive** - Take this form to REGISTRATION at Pederson Lodge.

Troop or Crew or Pack #: _____ District /Council: _____

Scout Leader or Unit Contact Person: _____

Email Address: _____ Phone: _____

Subcamp Assignment:
(for Weekend only) _____ Parking Lots Assigned: _____

19th Challenge Trophy Camporee (Oct 20, 21, 22 /2017) **“Check In” Form #1B**

Please fill out the check in form completely prior to arrival at the Camporee before going to the Registration Building.

From Form 1A
PRE-PAID Numbers: → **Weekend Units**

1) Number of total youth **prepaid:**

2) Number of attending adults **prepaid:**

3) Total attending **prepaid:** (From Form 1A)

4) # of Staff pre-paid (youth & Adults) This is # of Staff Caps to be supplied to your troop.

| For office use only |
|---|
| Check in time: _____ |
| # of Camporee Patches given: _____ |
| # of Subcamp Patches awarded: _____ <i>Weekend Pre-paid gets subcamp patches</i> |
| STAFF – Staff Cap & patches: _____ |
| Amount Pre-paid to council: _____ |
| Remaining balance paid at camp: _____ |
| Received by: _____ |

Registration - Pay at the Camporee Weekend Troops. (\$25/person)

Subcamp STAFF – Staff Registration fee is the same as Weekend Attendee Fees
= Choose the Option(s) below for your Unit – There may be several in your Unit =

* Includes all leaders and parents.

| | | |
|-----------------|------------------------|--------------------------------|
| | <u>Weekend*</u> | <u>Staff - Day Pass</u> |
| Fee per person: | \$25.00 | \$16.00 |

5) Total attending **NOT** prepaid: *
2 Subcamp Patch per person for Weekend.

Subtotal paid at Camp: \$

Includes Lunch
\$

Please make checks payable to Boy Scouts of America.
Account # 1-6801-806-20

Total Paid @ Camp

By signing below, I certify that all youth and adults attending with the “above mentioned unit” shall abide by all rules and regulations set forth by Seneca Waterways Council’s Camps and the Challenge Trophy Camporee.

Signature: _____

Date: _____