

**Webelos Resident Camp
Registration Form**

TO BE FILLED OUT BY PARENT/GUARDIAN FOR EACH YOUTH PARTICIPANT PLEASE PRINT IN INK

Scout Name: _____ Circle one: Webelos I or Webelos II
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Email: _____

Pack #: _____ District: H M Q

Circle one: T-shirt Size: AS AM AL XL

I would like to volunteer as an Adult Site Volunteer:

Name: _____
Address: (if different from above: _____
Telephone: _____ Email: _____

Circle one: T-shirt Size: AS AM AL XL XXL

I would like to register for Webelos Resident Camp:

_____ @ \$200.00 per camper
_____ @ \$7.00 per extra T-shirt (one comes with registration)
_____ @ \$175.00 If registered before May 14, 2005
----- Completed Class 2 Health Form (MD signature required)
_____ Total Fees

Visa/MC: # _____ Exp date: _____
Print Name on Card: _____ Signature: _____
Check: # _____ (Make checks payable to Mohegan Council)
Cash: \$ _____

Return completed form to:
Mohegan Boy Scout Council
19 Harvard Street
Worcester, MA 01609
Phone: 508-752-3769
Fax: 508-752-3047

Emergency Contact:
Names: _____
Phone#: _____
Relationship: _____