



**Powder Mill Cub Scout Day Camp
June 25 through 29, 2018
Granogue**

Campers Name: _____

Address: _____

Camper's Date of Birth: ____/____/____ Grade In Fall 2018: _____

Is This Camper a Tiger Scout? Yes ____ If So, Parent Partner Name: _____

Is This Camper a Cub Scout? Yes ____ No ____ If So, Pack Number _____

Parent First and Last Name: _____

Parent Phone Number: (H/W) _____ Mobile _____

Emergency Contact: _____
(if we can't reach the parent listed above)

Relationship to Camper: _____ Emergency Contact Phone No. _____

My child, may be transported to/from Camp with the following people:

- 1) _____ 2) _____
- 3) _____ 4) _____
- 5) _____ 6) _____

I hereby authorize Camp personnel (Camp Directors, Program Directors, Den Leaders, Den Helpers) to release my child to any of the above noted people.

Anyone your child should not be released to:

- 1) _____ 2) _____
- 3) _____ 4) _____

I would like to be contacted by text should camp be cancelled or closed early Yes: ____ No: ____

Number(s) you would like to use for Text Alert : (____) _____ - _____
(____) _____ - _____
(____) _____ - _____

Photos will be taken during camp all week long. We will utilize these photos for promotional purposes in accordance with your wishes as indicated on your Health and Medical Record.

Date: _____

Parent/Guardian Signature: _____

Please Bring This Completed form With You to Registration Day
Or Via Email to
jmcnamara@comcast.net