

# THE ADVENTURE BEGINS

POKAGON DISTRICT DAY CAMP 2019  
CUB APPLICATION



BIXLER LAKE, KENDALVILLE

JUNE 24-26, 2019

EARLY BIRD REGISTRATION \$50 BY MAY 31ST, 2019  
(AFTER MAY 31ST \$65)

*REGISTRATIONS MADE AFTER MAY 31ST  
WILL NOT INCLUDE A T-SHIRT.*

*T-SHIRTS ARE A FIRST COME FIRST SERVE BASIS.  
ADDITIONAL T-SHIRTS MAY BE PURCHASED AT CHECK IN IF AVAILABLE.*

CHECK IN STARTS AT 8:15 AM ON JUNE 24TH, WITH CAMP STARTING AT 9:00 AM.

ON JUNE 25TH AND 26TH DROP-OFF BEGINS AT 8:30 AM, WITH CAMP STARTING AT 9:00 AM.

EACH DAY WE WILL FINISH UP CAMP AT 4:30PM.

USE THE ATTACHED FORM OR CONTACT CAMP DIRECTOR  
DAVE MANN AT 260-585-9853 OR AT [HANDYMANN7@GMAIL.COM](mailto:HANDYMANN7@GMAIL.COM)

TIFFANY PARKER AT 317-908-2415 OR AT  
[TIFFANYCONRAD@ROCKETMAIL.COM](mailto:TIFFANYCONRAD@ROCKETMAIL.COM)

# Pokagon District Day Camp

## INDIVIDUAL SCOUT REGISTRATION

CAMPER NAME \_\_\_\_\_ PACK \_\_\_\_\_ GRADE COMPLETED (JUNE 2019) \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (\_\_\_\_) \_\_\_\_\_ AGE \_\_\_\_\_ EMAIL \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ PARENT/GUARDIAN \_\_\_\_\_

### CAMP FEES

REGULAR DAY CAMP FEE \$65.00

(ONE SHIRT FREE TO CAMPERS)

EARLY BIRD DISCOUNT -\$15.00

(IF PAID BY MAY 31<sup>ST</sup>)

EXTRA SHIRT (\$10 EACH) \_\_\_\_\_

(2X AND UP ARE \$13)

SIBLING DISCOUNT - \_\_\_\_\_

(SUBTRACT \$5 PER BROTHER/SISTER)

\_\_\_\_\_  
TOTAL FEES \_\_\_\_\_

### ORDER YOUR FREE SHIRT

AND ANY ADDITIONAL SHIRTS

YOUTH SMALL \_\_\_\_\_

YOUTH MEDIUM \_\_\_\_\_

YOUTH LARGE \_\_\_\_\_

ADULT SMALL \_\_\_\_\_

ADULT MEDIUM \_\_\_\_\_

ADULT LARGE \_\_\_\_\_

ADULT X LARGE \_\_\_\_\_

ADULT 2X LARGE \_\_\_\_\_

ADULT 3X LARGE \_\_\_\_\_

ADULT 4X LARGE \_\_\_\_\_

TOTAL SHIRTS \_\_\_\_\_

**MAKE CHECKS PAYABLE TO AWAC WITH SCOUTS  
NAME IN THE MEMO SECTION.**

MAIL TO:

AWAC

8315 W JEFFERSON BLVD

FORT WAYNE, IN 46804-8306

**IF YOU WOULD LIKE TO VOLUNTEER AT  
DAY CAMP, PLEASE FILL OUT A STAFF  
REGISTRATION FORM. THANK YOU!**

AC # 6341



**CAMPER RELEASE AUTHORIZATION**

The below signature authorizes ONLY the following people to pick up my child from Day Camp:

IF A PERSON IS NOT LISTED, THEY WILL NOT BE ALLOWED TO TAKE YOUR CHILD HOME UNTIL WE HAVE CONTACTED YOU BY PHONE, EVEN IF THE PERSON CLAIMS TO BE A LEGAL CUSTODIAL PARENT OR GUARDIAN. Without this form, we are ONLY allowed to release your child to the person who signed the camp application. This is for the safety of your child!

Name\_\_\_\_\_

Name\_\_\_\_\_

Name\_\_\_\_\_

Name\_\_\_\_\_

**MEDICAL AUTHORIZATION**

All regular medications must be kept at the First Aid Station and the scout must pick them up from the Camp Health Officer at the required time and take it themselves. Other Day Camp Staff CANNOT dispense medicine!

**PARENTAL AUTHORIZATION**

The person herein described has my permission to engage in all activities, except as noted in Parts A & B of scout physical form. I hereby give permission to the physician, selected by the leader in charge, to hospitalize, secure proper anesthesia, or to order injection or surgery for my child.

**TALENT RELEASE**

I hereby assign and grant the Anthony Wayne Area Council, Boy Scouts of America, the right and permission to use and publish the photographs/ films/ video and other electronic representations to include sound recordings made during Day Camp. I hereby release Anthony Wayne Area Council, Boy Scouts of America, from any and all liability from such use and publication. I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage and/or distribution of said photographs/ films/ video tapes/ electronic representations and/or sound recordings without limitation at the discretion of the Anthony Wayne Area Council, Boy Scouts of America, and I specifically waive any right to compensation I may have for any of the foregoing.

Signature\_\_\_\_\_

Date\_\_\_\_\_