



Council _____

Troop _____ Youth Male _____ Female _____

Leaders Male _____ Female _____

<i>CAMP SITES</i>	<i>CAPACITY</i>	<i>June 6-12, 2021 Week 1</i>	<i>June 13-19, 2021 Week 2</i>	<i>June 20-26, 2021 Week 3</i>	<i>June 27- July 3, 2021 Week 4</i>	<i>July 4-10, 2021 Week 5</i>	<i>July 11-17, 2021 Week 6</i>	<i>July 18-24, 2021 Week 7</i>
<i>Arapaho</i>	<i>50</i>							
<i>Wichita</i>	<i>60</i>							
<i>Chickasaw</i>	<i>60</i>							
<i>Kickapoo</i>	<i>40</i>							
<i>Kiowa</i>	<i>36</i>							
<i>Sac & Fox</i>	<i>50</i>							
<i>Choctaw</i>	<i>60</i>							
<i>Comanche</i>	<i>60</i>							
<i>Osage</i>	<i>50</i>							
<i>Ottawa</i>	<i>50</i>							
<i>Pawnee</i>	<i>40</i>							
<i>Shawnee</i>	<i>64</i>							
<i>Apache</i>	<i>40</i>							
<i>Cheyenne</i>	<i>48</i>							
<i>Ponca</i>	<i>36</i>							
<i>Creek</i>	<i>50</i>							
<i>Cherokee</i>	<i>40</i>							
<i>Delaware</i>	<i>30</i>							
<i>Navajo</i>	<i>30</i>							
<i>Miami</i>	<i>30</i>							
<i>Crow</i>	<i>60</i>							
<i>Seminole</i>	<i>30</i>							

Please note the contact person will receive all notices, updates and billings. It is that persons responsibility to share with your troop.

Summer Camp Contact Person

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Home phone: _____ **Work:** _____

Cell phone: _____ **Fax:** _____

Email: _____

Summer Camp Scoutmaster

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Home phone: _____ **Work:** _____

Cell phone: _____ **Fax:** _____

Email: _____



INDIAN NATIONS COUNCIL
BOY SCOUTS OF AMERICA