

2011 WEBELOS CAMP CAMPSITE REQUEST FORM

Reserve your Pack's campsite for the 2011 summer session. All sessions are limited to 250 boys.

PACK _____ DISTRICT _____ DATE _____
 COUNCIL _____

CHOOSE YOUR CAMPSITE

Circle the session and mark the campsite with your 1st, 2nd, and 3rd choices.

Maximum totals in campsites include boys and adults.

<u>DATES</u>	<u>JAMES RAY SITES AND SIZES</u>																								
Session 1 – June 12-15	<table style="width: 100%; border: none;"> <thead> <tr> <th style="width: 80%;"></th> <th style="text-align: right; padding-right: 10px;"><u>MAX</u></th> </tr> </thead> <tbody> <tr><td>_____ Apache</td><td style="text-align: right;">36</td></tr> <tr><td>_____ Cedar</td><td style="text-align: right;">36</td></tr> <tr><td>_____ Cherokee</td><td style="text-align: right;">36</td></tr> <tr><td>_____ Cochise</td><td style="text-align: right;">36</td></tr> <tr><td>_____ Comanche</td><td style="text-align: right;">36</td></tr> <tr><td>_____ Geronimo</td><td style="text-align: right;">36</td></tr> <tr><td>_____ Hanta-Pa-Ha</td><td style="text-align: right;">36</td></tr> <tr><td>_____ Lone Eagle</td><td style="text-align: right;">36</td></tr> <tr><td>_____ Navajo</td><td style="text-align: right;">36</td></tr> <tr><td>_____ Sioux</td><td style="text-align: right;">24</td></tr> <tr><td>_____ Tejas</td><td style="text-align: right;">36</td></tr> </tbody> </table>		<u>MAX</u>	_____ Apache	36	_____ Cedar	36	_____ Cherokee	36	_____ Cochise	36	_____ Comanche	36	_____ Geronimo	36	_____ Hanta-Pa-Ha	36	_____ Lone Eagle	36	_____ Navajo	36	_____ Sioux	24	_____ Tejas	36
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Session 2 – June 15-18																									
Session 3 – June 19-22																									
Session 4 – June 22-25																									
Session 5 – June 26-29																									
Session 6 – June 29-July 2																									

REQUIRED DEPOSIT

This \$100.00 fee will apply to your total camping fee, but is not refundable or transferable to any other fees.
 (The Camp Director has the right to move units as necessary.)

PLEASE PRINT CLEARLY

YOUTH ATTENDANCE EXPECTED: _____ **ADULTS ATTENDANCE EXPECTED:** _____

NAME OF LEADER: _____ **BUSINESS PHONE:** _____

MAILING ADDRESS: _____ **HOME PHONE:** _____

CITY AND STATE: _____ **ZIP CODE:** _____

E-MAIL: _____