

Youth Application:

- Scout (Tiger, Wolf, Bear, Webelos)
- Sibling (Girl, PeeWee)

One form per child.
Please print neatly.

Bayshore District
"cub scouts investigate"
Twilight Camp June 15-19, 2009
Youth Application



Name	Date of Birth	Age	Pack	Parent Volunteer <input type="checkbox"/> Yes <input type="checkbox"/> No
Address	City		Zip	
Home Phone	Work Phone	Cell Phone/Pager		
Parents/Guardians				
E-mail				

Please carefully fill out every blank of pages 1 & 2. If registration forms are not completely filled out your child will not be registered or assigned in to a den.

<p>Rank or Group: (for '09-'10 school)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Tiger – will be in 1st grade next year (adult partner must attend) <input type="checkbox"/> Wolf – will be in 2nd grade next year <input type="checkbox"/> Bear – will be in 3rd grade next year <input type="checkbox"/> Webelos I – will be in 4th grade next year <input type="checkbox"/> Webelos II – will be in 5th grade next year <p>If a twin, should he be in the same den as his brother? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>For children of full time adult volunteers:</p> <ul style="list-style-type: none"> <input type="checkbox"/> PeeWee – kids, ages 3-5, potty trained (parent must volunteer) <input type="checkbox"/> Girl – girls ages 6-10 (parent must volunteer)
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People authorized to pick up scout (other than parents listed above). We suggest listing parents of other scouts in your pack attending camp who can take your child home if needed.

Name	Phone	Name	Phone
List anyone not allowed to pick up this child:			

T-Shirt: Check one

<input type="checkbox"/> Youth Medium 10-12	<input type="checkbox"/> Adult Small	<input type="checkbox"/> Adult Large
<input type="checkbox"/> Youth Large 14-16	<input type="checkbox"/> Adult Medium	<input type="checkbox"/> Adult X Large

Extra T-Shirt(s) (\$7 each - optional): (enter quantity)

_____ Youth Medium 10-12	_____ Adult Small	_____ Adult Large
_____ Youth Large 14-16	_____ Adult Medium	_____ Adult X Large

(note: Extra shirts are intended for use by campers and volunteers.
An extra shirt decreases midnight laundry!)

<p>June 15-19 at 4:30</p> <p><u>Questions</u></p> <p>Leslie Melton: 281-487-4970, leslie.melton@sbcglobal.net</p> <p>Karan Garske: 281-461-0622, garske@earthlink.net</p>	<table style="width: 100%;"> <tr> <td>Scout (Tiger, Wolf, Bear, Webelos)</td> <td style="text-align: right;">\$50.00</td> </tr> <tr> <td>Sibling (PeeWee, Girl)</td> <td style="text-align: right;">\$20.00</td> </tr> <tr> <td>Extra t-shirt, size marked above (optional) \$7.00 x (#)</td> <td style="text-align: right;">= \$_____</td> </tr> <tr> <td>Late registrations (after May 7) - see page 3, parent <u>must</u> volunteer</td> <td style="text-align: right;">(\$25.00)</td> </tr> <tr> <td>Amount Paid</td> <td style="text-align: right;">\$_____</td> </tr> </table>	Scout (Tiger, Wolf, Bear, Webelos)	\$50.00	Sibling (PeeWee, Girl)	\$20.00	Extra t-shirt, size marked above (optional) \$7.00 x (#)	= \$_____	Late registrations (after May 7) - see page 3, parent <u>must</u> volunteer	(\$25.00)	Amount Paid	\$_____
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Talent Release: I hereby assign and grant to the Boy Scouts of America the right and permission to use and publish the photographs/ film/video tapes/electronic representations and/or sound recordings made of me by BSA, and I hereby release BSA 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/film/ video tapes/electronic representations and/or sound recordings without limitation at the discretion of BSA and I specifically waive any right to any compensation I may have for any of the foregoing (required).

Parent Signature: _____ **Date:** _____

Page 2: SCOUT / SIBLING/ VOLUNTEER / ADULT HEALTH HISTORY

(One form per scout/adult/sibling. Must complete **entire** form completely including immunizations & consent to treat.)

Name:	Date of Birth:	Age:
In case of emergency, parents will be contacted first. If parent/guardian cannot be reached, call these people in this order: (adults may want to list spouse):		
1.	Phone:	Cell #:
2.	Phone:	Cell #:
Physician:	Phone:	
Health Insurance Carrier:	Policy #	

<input type="checkbox"/> Yes <input type="checkbox"/> No Asthma	<input type="checkbox"/> Yes <input type="checkbox"/> No Allergy to Mold / Pollen / Dust	<input type="checkbox"/> Yes <input type="checkbox"/> No Bleeding Problems
<input type="checkbox"/> Yes <input type="checkbox"/> No Heart Trouble	<input type="checkbox"/> Yes <input type="checkbox"/> No Allergy to Sunscreen / DEET	<input type="checkbox"/> Yes <input type="checkbox"/> No Heat related problems
<input type="checkbox"/> Yes <input type="checkbox"/> No Medication Reactions	<input type="checkbox"/> Yes <input type="checkbox"/> No Allergy to Food / Plant / Latex	<input type="checkbox"/> Yes <input type="checkbox"/> No Learning difficulties
<input type="checkbox"/> Yes <input type="checkbox"/> No Diabetes	<input type="checkbox"/> Yes <input type="checkbox"/> No Allergy to Bee Stings / Insects bites	<input type="checkbox"/> Yes <input type="checkbox"/> No ADD / ADHD
<input type="checkbox"/> Yes <input type="checkbox"/> No Fainting Spells	<input type="checkbox"/> Yes <input type="checkbox"/> No Seizures / Convulsions	<input type="checkbox"/> Yes <input type="checkbox"/> No Other medical conditions

Explain any "yes" answers:

Yes No Does person listed need any special equipment (e.g., glasses)? If so, list

Yes No Are there any restrictions of activities? Explain:
(Please be specific in describing condition and appropriate treatment methods necessary, in order to ensure your child's safety.)

Yes No Do any of the conditions listed above require medications? If so, list

Yes No Will person listed be taken off any medications in the last 30 days before camp? If so, list

Yes No Will it be necessary to administer any medications while at camp? If so, list
(All medications administered at camp must be given to first aid upon arrival at camp & must be in the original container.)

Consent for Medications By checking YES, I give my permission to the camp paramedic, nurse, or physician to administer the following oral or topical medications without contacting a parent or guardian. Medication use will be per manufacturer's guidelines. Checking NO requires that consent be obtained from a parent/guardian at the time the medication is to be used. Parents will receive a written note from camp following oral medication administration.

Acetaminophen or Ibuprofen (for headache/muscle ache)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Antibiotic ointment (for lacerations/ abrasions)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Benadryl (or similar antihistamine tablets for allergy)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Sunscreen	<input type="checkbox"/> Yes <input type="checkbox"/> No
Hydrocortisone cream (for itch from rash or insect bites)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Insect Repellent (containing DEET)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Calamine or Caladryl lotion (for insect bites or rashes)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Medicated Powder or Desitin (for heat rash)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Immunizations The Texas Department of Health requires actual dates for **scouts/siblings/adults**. Registration will not be accepted unless the actual dates are listed. **Do not put "current", "up to date", or "on file with school or doctor."** Adults only need to list month/year.

Date of last immunization (mo/day/yr)	Date of last immunization (mo/day/yr)
DPT / /	MMR / /
Polio / /	Hepatitis B / / (if born after 9/1/92)

I give permission for full participation in BSA program, subject to limitations noted herein.

CONSENT TO TREAT The health history above is correct so far as I know. In case of emergency, I understand every effort will be made to contact me (if an adult, my spouse or next of kin). In the event I cannot be reached, I hereby give my permission to the physician selected by the Camp Director to secure proper treatment including hospitalization, anesthesia, surgery, or injections of medication for my child (or for me, if an adult). Some hospitals require the parent/guardian signature to be notarized.

Signature of parent/guardian or Adult: _____ **Date:** _____

Volunteer Application:

- Full Time Adult Volunteer
- Part Time Adult Volunteer
- Tiger Adult Partner
- Adult Job Sharing
- Den Chief (ages 11-13)
- Junior Helper (ages 14-18)

**One form per person.
Please print neatly.**

Bayshore District
"cub scouts investigate"
 Twilight Camp June 15-19, 2009
Volunteer Application



Name	Date of Birth	Age	Pack	Parent on Staff <input type="checkbox"/> <small>(Den Chief / Junior Helper)</small>
Address		City	Zip	
Home Phone	Work Phone		Cell Phone/Pager	
Parents/Spouse				
E-mail				

Please fill out every blank of this form (pages 1&2). If registration forms are not completely filled out the pack's registration will not be accepted.

By filling out this application, we are counting on you to volunteer. Please take this seriously. If an emergency arises, please notify us if you cannot attend camp. Packs are required to have one full time adult volunteer for every 4 youth registered. Your pack is relying on you to attend camp and complete all volunteer requirements.

Each adult at camp must be a registered BSA adult leader (including Tiger Adult Partners) in order to volunteer. Submit your BSA Adult Application to your pack leadership and attach a copy of the signed application to the camp application. Each adult must also complete camp training and YPT training and turn in copy of YPT card with camp applications.

Free T-Shirt: <small>(for full time volunteers/Tiger Partners)</small>	<input type="checkbox"/> Adult Small	<input type="checkbox"/> Adult Large	<input type="checkbox"/> Adult 2X Large
	<input type="checkbox"/> Adult Medium	<input type="checkbox"/> Adult X Large	<input type="checkbox"/> Adult 3X Large

Extra T-Shirt (\$7):(list quantity) ___ Youth Medium 10-12 ___ Adult Small ___ Adult Large ___ Adult 2X Large
 ___ Youth Large 14-16 ___ Adult Medium ___ Adult X Large ___ Adult 3X Large

(note: Extra shirts are intended for use by campers and volunteers. An extra shirt decreases midnight laundry!)

<input type="checkbox"/> Full-time volunteer: will work 4:15 – 9:00 every day <input type="checkbox"/> Part-time volunteer: list times/days you can work (be specific): <small>(part-time volunteers do not count towards the required adult/child ratio)</small> <input type="checkbox"/> Job Sharing: list person you are sharing a job with to equal full-time: <small>(two people sharing a full time position counts as one volunteer toward the required adult/child ratio)</small> <input type="checkbox"/> Tiger Adult Partner: will attend camp with child 4:15 - 9:00	Rank of your Scouts(s): <small>(for '09-'10 school year)</small>
Check Preferred Positions: (these are not guaranteed) <input type="checkbox"/> Den Escort (walk around with dens) – most volunteers are assigned here <input type="checkbox"/> Sibling Camp (peewees) <input type="checkbox"/> Girl Den Escort (sibling) <input type="checkbox"/> Area Assistant (games, crafts, BB/Archery, waterguns, slingshots, skills) <input type="checkbox"/> Key Staff (plan an area & activities; approved by Camp Chair) <input type="checkbox"/> Facilities Staff (must be able to arrive early & stay late, requires lifting)	Training: attach a copy of your training cards <input type="checkbox"/> YPT (taken on-line after 01/08) (required) <input type="checkbox"/> BSA BB/Archery Certification Expiration Date <input type="checkbox"/> CPR Certification Expiration Date <input type="checkbox"/> Red Cross Certification Expiration Date <input type="checkbox"/> EMT, RN, or MD
<p><u>All adults must attend one of the training sessions:</u> May 26 or May 28 at 7:00 University Baptist Church <u>and complete YPT</u> online at: www.shac.org/Home/Training/YouthProtectionTrainin/ (taken ON-LINE after January 1, 2008)</p>	

<p>June 9-13</p> <p><u>Questions</u> Leslie Melton: 281-487-4970, leslie.melton@sbcglobal.net Karan Garske: 281-461-0622, garske@earthlink.net</p>	<table style="width: 100%;"> <tr> <td>Den Chief (ages 11-13)</td> <td style="text-align: right;">\$10.00</td> </tr> <tr> <td>Adult & Junior Helper (ages 14&up)</td> <td style="text-align: right;">N/C</td> </tr> <tr> <td>Extra t-shirt (optional)</td> <td style="text-align: right;">\$7.00 x (#) _____ = \$ _____</td> </tr> <tr> <td>Amount Paid</td> <td style="text-align: right;">\$ _____</td> </tr> </table>	Den Chief (ages 11-13)	\$10.00	Adult & Junior Helper (ages 14&up)	N/C	Extra t-shirt (optional)	\$7.00 x (#) _____ = \$ _____	Amount Paid	\$ _____
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Adult or Parent Signature: _____ **Date:** _____

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(One form per scout/adult/sibling. Must complete entire form completely including immunizations & consent to treat.)

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1.	Phone	Cell
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Physician:	Phone	
Health Insurance Carrier	Policy #	

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Signature of parent/guardian or Adult: _____ **Date:** _____

BAYSHORE DISTRICT TWILIGHT CAMP 2009

"cub scouts investigate"



Suit up for the adventure that's out of this world at the Pasadena Fairgrounds. Scouts entering 1st – 5th grade for the '09-'10 school year may attend: **June 15-19 at 4:30pm**

This year's camp will be full of fun and excitement. Scouts will make new friends, and share all kinds of new experiences. This year's camp will be offering BB, archery, water guns, sling shots, sports, skills, and crafts. Each camper will receive a t-shirt, patch, and belt water bottle holder. Tigers, Wolves, Bears, and Webelos will be working on achievements and badges.

What to bring to camp

- ◆ Sack dinner & drink (in plastic bag with name & den number) **with no mayonnaise** on the sandwich
- ◆ Bottle of water (e.g., Ozarka, Deja Blue) with a 1" lid – can be refilled at camp, (a clip will be provided to attach the bottle to the boy's waistband)
- ◆ Sun Screen & Bug Spray (apply before camp starts)
- ◆ Pencil, Hat & Rain Poncho
- ◆ Camp Uniform: camp T-shirt and wrist band (will be provided on Monday of camp), shorts, socks, closed toes shoes
- ◆ Bucket with a lid to serve as storage as well as a seat (e.g., large paint bucket). Many grocery stores will give away their large icing buckets. Hardware Stores sell 5-gallon paint buckets.
- ◆ Please make sure your scout is very hydrated before they show up to camp. We encourage you to have your scouts drink as much as possible on their way to camp. The 1st hour of camp is very hot. You may want to send an extra frozen water bottle.
- ◆ Money for the trading post (optional).
- ◆ Water gun (optional, extra pair of socks, towel or water shoes)

Registration: Please completely and neatly fill out pages 1 & 2 of the registration form for each person registering. Remember that actual dates are required on the immunization part of the medical form (even for adults).

Refunds are not given. Adults should attach a copy of any training certifications, and YPT card.

Late registration **Late registrations may be dropped off at the Clear Lake Scout Shop.** Cub Scout registrations will not be accepted at camp (only boy scout youth volunteers). Late registrations will only be accepted if a registration form for a full time adult is attached and if space in a den is available. There is a \$25 late registration fee. A patch and t-shirt is not guaranteed for anyone registering after May 7th.

Volunteers: We need 200+ volunteers to run camp! It is fun and your child will be better for it. Each pack is required to have one full-time adult volunteer for every four campers (scouts and siblings). Tigers are required to have their adult partner with them. These adult partners do NOT count towards the four to one ratio. To be counted in your pack's ratio, you must be able to volunteer from 4:15 – 9:00, every day and complete all of the requirements. Part-time helpers and junior helpers do not count towards the ratio. Most volunteers will be assigned as den escorts in an area near their son. According to Texas state law, all on-site adults (part-time and full-time) must be registered BSA leaders (including Tiger adult partners), attend Camp training, complete YPT training on-line at www.shac.org/Home/Training/YouthProtectionTrainin/, fill out a camp registration and medical form, complete additional forms that will be provided at training, and have a background check completed by staff. BSA adult applications are separate from camp applications and must be completed and turned into your pack leadership. We will offer two camp training sessions: Tuesday May 26 or Thursday May 28 at University Baptist Church (16106 Middlebrook Dr. 77059) at 7:00. Please attend the 5/26 training if at all possible. Full time volunteers will receive a special gift and t-shirt. Part-time volunteers are not guaranteed a t-shirt and are asked to order their own shirt.

Visitors: Parents may visit camp for up to 30-minutes per day. Parents must check-in at headquarters and receive a name tag. Adult visitors must bring a driver's license and all visitors (including youth) must complete a medical form (page 2). This is State mandated and is for the safety of all campers. Should a parent wish to remain at camp longer than 30-minutes on any given day, they should consider becoming a full time or part time volunteer.

Sibling Care: **Sibling care is available only for non-scouting children of the adult volunteers.** Sibling programs are provided so that the parent volunteers and their children will have a positive camp experience. These children will only be allowed at camp on the days the parent is at camp. PeeWees (girls and boys age 3-5 and **potty trained**) offers crafts, games and songs. Girls entering 1st-5th grade will participate in all Scout activities.

Tiger Cubs: Each Tiger Cub is required to have a parent/guardian with him at all times. This will most likely be their first experience in Scouting. They will participate in all Scout activities and earn achievements towards the Tiger rank.

Bayshore Beacon: All adults are encouraged to join the district's e-mail group to keep up with the latest district information: Send a blank e-mail to: Bayshorebeacon-request@ani-lati.org

Den Assignments: Den assignments and late breaking information will be e-mailed, so please make sure the e-mail address is legible. For last minute questions, please stop by camp during set up day on June 14 from 4:30 – 8:00

Registration forms and fees (check payable to your pack) are due by April 30, 2009.

Pack _____ Pack Camp Coordinator: _____

Phone: _____ Address: _____