



B.S.A. Troop 53 Maytown-Donegal
WEBELOS ACADEMY AND CAMPFIRE
Saturday, October 27, 2007 at Donegal Presbyterian Church,
1891 Donegal Springs Road, Mount Joy, PA

Troop 53 Webelos Academy WEBELOS Registration Form

Name: _____

Pack #: _____

Address: _____

City: _____

Parent / Guardian name: _____

Phone #: _____

Emergency Contact person: _____

Emergency number: _____

MEDICAL INFORMATION

This scout is allergic to: _____

List any medication the scout is taking: _____

Please write below any additional information or situations the unit leader should be aware of:

Name of Adult who will be taking the scout home: _____

Select the Activities in which you would like to participate. We will be offering one activity in the morning and one in the afternoon.

Period 1 **Scientist**____ **Citizen**____ **Handyman**____

Period 2 **Geologist**____ **Readyman**____ **Artist**____

___ I can attend the morning session only (11:15 - 1:00).

___ I can attend the afternoon session only (2:15 - 4:00).

___ I can attend the dinner (4:00 - 5:15). Number in family that will attend. ___

___ I can attend the campfire program (5:30 - 7:00). Number in family that will attend. ___