

# TROOP 505 January '2012 CAMPOUT REGISTRATION

**What:** CASCADE MOUNTAIN SKI TRIP AND CAMPOUT AT CFL  
**Where:** Cascade Mountain, Portage Wisconsin. Ph: 1-800-992-2SKI  
**When:** Friday January 20<sup>th</sup> thru Sunday January 22<sup>nd</sup> (Skiing on Sat. 21<sup>st</sup> @ Cascade Mountain)  
**Activities:**  
1 Ski...Ski...and more Skiing  
2 Snowboarding  
3 Rentals Included (Skis/Snowboard, Boots, Poles, Helmet) \*Helmets are a BSA requirement  
4 All Meals Included on this Campout!  
5 Movie Night, Activities Planned at CFL  
6 Cabin Camping at CFL (you may Tent Camp as well...)  
**Arrival:** 5:30 P.M. Friday, January 20<sup>th</sup> Drop off Scouts at PNC Bank parking lot on Gartner, be prompt.  
**Load-up:** 5:45 P.M. - We need your help to load up and get out on time.  
**Departure:** 6:00 P.M. sharp!  
**Return:** Around 12:30 PM on Sunday January 22<sup>nd</sup>, we will arrive at PNC Bank parking lot.  
**Fees:** \$90 per Scout/Adult. Please make check payable to Troop 505 & submit with form.  
\*\*\*\*Lessons: \$10.00 extra and we will sign them up with fellow Scouts

**Forms & Fees need to be in at the January 9<sup>th</sup> meeting!!!**

**General Notes:**

- Forms need to be turned in by Monday January 9<sup>th</sup>
- Be prompt to drop off your Scout(s). (Drop off at PNC Bank parking lot)

**Specific Notes:**

- If you are running late & it is nearing departure, call Brian May ( 630-429-1143 ).
- You may be asked to drive if your Scout attends and we are running short on drivers.
- Direct questions to event Assistant Scoutmaster Brian May ( 630-429-1143 ).
- Emergency contact person for this Outing is Brian May ( 630-429-1143 ).
- Planning to leave early or arriving late, you must notify Mark Wilson ( 630-854-3352 ) one week prior.

===== CUT AND RETURN BOTTOM PORTION WITH PAYMENT =====

Scout's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Patrol Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Parent camping? Y / N Parent will drive to Y / N, and/or from Y / N Cell (driver) \_\_\_\_\_  
Vehicle Driving – Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ # Seat Belts \_\_\_\_\_  
Special Transportation needs: Arrive Late? \_\_\_\_\_, Leave Early? \_\_\_\_\_, Or Other? \_\_\_\_\_  
Ski Rental Needed: Y/N \_\_\_\_\_ Ski Lessons: Y/N \_\_\_\_\_  
Food allergies or restrictions? \_\_\_\_\_, Explain: \_\_\_\_\_  
Will your Scout be taking prescription medicine during this Camp out? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, name of medication(s): \_\_\_\_\_  
(Epi Pens & Inhalers as listed on Class I's are to be on Scouts' person at all times.)  
Use Escrow Account Y / N \$ \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

CASCADE MOUNTAIN RESORT JANUARY 20<sup>TH</sup> – 22<sup>ND</sup> 2012