



EAGLE BAY CUB SCOUT DAY CAMP 2019
Superheroes

ADULT VOLUNTEER REGISTRATION
Must be in Office by July 6!

Pack or Troop Number _____ Over 21? YES NO Date of Birth _____

Last Name: _____ First Name: _____

Home Phone # _____ Cell Phone # _____

Email Address: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Which day(s) you will be volunteering with Day Camp? (put X in which days you can help)

Monday	Tuesday	Wednesday	Thursday	Friday
Setup	Setup	Day 1	Day 2	Day 3 /Teardown

T-shirt Size: SM MED LG XL 2X 3X **Cost of T-shirts: \$8.00**
**** YOUR T-SHIRT IS FREE IF YOU VOLUNTEER FROM 8:30AM-4PM ON ALL THREE DAYS (W/T/F). ****

I would like to volunteer in the following area(s): Check all that apply.

Walker _____ (Name of Scout you would like to walk with)

If necessary, would you walk with another group? YES NO

- Cub Crafts
- Tot Lot
- Fishing
- Sports & Games
- BB Gun Range
- Archery Range
- Nature
- Wrist Rockets
- Cub cooking
- Webelos's Cooking
- BMX
- Other

Previous Day Camp Experience: _____

Are you registered with Boy Scouts of America? YES (Position: _____) NO

Are you Youth Protection Trained? YES NO

Scouting Background: _____

Are you certified in any of the following? If so, please attach a copy of your certification(s).

- CPR Certifying Agency _____ Expiration Date _____
- First Aid Certifying Agency _____ Expiration Date _____
- Nurse or Dr. Certifying Agency _____ Expiration Date _____
- EMT Certifying Agency _____ Expiration Date _____

OFFICE USE ONLY
Account:
1-6701-451-21

***** BSA ANNUAL HEALTH & MEDICAL RECORD – PARTS A & B IS REQUIRED FOR ALL ADULTS ATTENDING CAMP *****

There is no charge assigned to Adult Volunteers!
Training is Required! See back of form for training dates.

Day Camp Director: Mischele Cheek, 614-783-0051