**Troop 216**

**Cahokia Mounds Spring Camporee**

**April 30-May 2, 2021**

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| **DATE:** | Friday, April 30 - Sunday, May 2, 2021 |
| **PLACE:** | Camp Warren Levis, 5500 Boy Scout Lane, Godfrey, IL 62035 |
| **DEPART:** | Friday, April 30 – 5:30 pm from First Christian Church Edwardsville parking lot. Please arrive 5:00-5:15pm to check-in and load gear.  |
| **RETURN:** | Sunday, May 2 – First Christian Church Edwardsville parking lot; no Scout should leave until dismissed by Senior Patrol Leader or Adult Leader |
| **FOOD:** | Eat dinner on own before departure. Troop provides Fri. night snack, Sat. meals, Sun. breakfast. |
| **COST:** | $28/Scout or adult (includes food & general camping costs) or $12 for day only on Saturday (includes lunch). |
| **WEAR:** | Class A for transportation to and from is mandatory! Class B for activities and weather appropriate clothing for camping. |
| **CONTACTS:** | Martina Bishopp 314-809-3267Ranger Station Phone: 618-567-4407, Ranger: Jim Goeken |

**PLEASE return permission slip & payment to Ms Bishopp or Mrs Gill**

**by 7:30 PM on Monday, April 26, 2021**

**---------------------------------------Submit bottom portion with payment --------------------------------------**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (parent’s name) give permission for my son, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (full name) to attend and participate in all activities that are planned.  I also give permission to any medical institution, person, or Scout Leader to render emergency treatment in the event of a medical emergency.  My son is in good health and (circle one) is / is not taking any medications. In the event medications are needed, I will give them to the Leader in the original container with written instructions.

Please note pertinent medical information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **EMERGENCY CONTACT NAME** | **PHONE #** | **RELATIONSHIP** |
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SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

☐ Scout - Saturday day only

☐ Scout - Camping Own tent \_\_\_\_ Troop tent needed \_\_\_\_

☐ Adult - Saturday day only

☐ Adult - Camping Own tent \_\_\_\_ Troop tent needed \_\_\_\_

 Indicate plan here ↓ if alternate arrival/departure

☐ I allow my Scout to be driven by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

☐ Please transfer from my Scout’s account to cover this activity

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| FOR ACTIVITIES CHAIR:  Rec’d on \_\_\_\_\_\_\_\_By DG MB | April 30-May2, 2021 Spring Camporee – Camp Warren Levis - $28 / $12

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| Amount | Cash | Check # | Scout Account | Notes  |  |
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