

Troop Camping with Core Staff Registration Form

Troop number _____
 Service unit _____
 Contact name _____
 Home phone _____ Work phone _____
 Cell _____
 Address _____
 City _____ State _____ ZIP _____
 County _____
 E-mail address _____

Please list girls individually Shirt size
(specify youth or adult size)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____

Session information check one

Camp Sycamore Valley

July 5-7

Camp Na Wa Kwa

July 19-21 July 26-28

July 21-23 July 28-30

Age level of troop (fall 2010) check one

Girl Scout Brownie Girl Scout Junior

Payment information

Number of girls = _____ x \$80 = \$ _____

Number of adults = _____ x \$15 = \$ _____

Total participants = _____ Total due = \$ _____

Please list adults individually Shirt size

1. _____
2. _____
3. _____

Use additional paper if needed.

Program Assistance Grant (PAG) information

Is financial assistance needed?

Yes No

If yes, include PAG application and \$10 deposit per girl.

Credit card information (Full fee payment only)

MasterCard Visa Cookie Dough

Card number _____

Expiration date _____ Amount to be charged \$ _____

Name of credit card holder _____

Signature _____

Check this box if you want your confirmation packet emailed to you.

For office use only	Amount enclosed	\$ _____
10-83-6230-3512 (Na Wa Kwa)	<input type="checkbox"/> Cash	
10-83-6230-3612 (Sycamore Valley)	<input type="checkbox"/> Check #	_____
	<input type="checkbox"/> Charge	