

\_\_\_\_\_ June 21<sup>st</sup> - 25<sup>th</sup> ← Check one or the other or application cannot be processed → \_\_\_\_\_ July 12<sup>th</sup> - 16<sup>th</sup>

*Dulaney District Day Camp: 2010 100 Years of Scouting*  
**YOUTH CREW APPLICATION**

**READ CAREFULLY**

1. ALL REGISTERED BOY SCOUTS ARE ENCOURAGED TO SIGN UP AS A MEMBER OF OUT YOUTH CREW. MOST BOYS WILL BE ASSIGNED TO A CAMP STATION TO ASSIST THE STATION LEADERS. THE CREW CHIEF WILL MAKE FINAL ASSIGNMENTS BASED ON THE BOYS EXPERIENCE AND SCOUTMASTER RECOMMENDATIONS.
2. ALL OTHER YOUTH AGE 14 OR OLDER ARE ENCOURAGED TO SIGN UP AS YOUTH CREW AND WILL BE ASSIGNED TO A STATION.
3. GIRLS UNDER AGE 14 AND BOYS UNDER 14 NOT REGISTERED AS A BOY SCOUT CAN NOT BE REGISTERED AS YOUTH CREW AND MUST REGISTER AS A JUNIOR CAMPER. THEY MUST NOT USE THIS FORM.

**Participant's Name:** \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Home Phone (\_\_\_\_\_) \_\_\_\_\_ Birth date: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ (email address will be kept private)

<b>FOR STAFF USE ONLY</b>
Amt. Paid: _____
Med. Form Rec'vd: _____

**Registered Boy/Girl Scout?** Yes \_\_\_ No \_\_\_ Troop: \_\_\_\_\_ Rank/Level: \_\_\_\_\_  
**Volunteering:** \_\_\_ All Week *or* \_\_\_ Monday \_\_\_ Tuesday \_\_\_ Wednesday \_\_\_ Thursday \_\_\_ Friday  
 Have you been on Day Camp Staff before? Yes \_\_\_ No \_\_\_ If yes, what position or area: \_\_\_\_\_

\_\_\_ I wish to be assigned to a Station according to my preference below  
 Please number in order of preference these Staff Areas:  
 \_\_\_ Adventure \_\_\_ Arts & Crafts \_\_\_ Fishing \_\_\_ Jr. Camp \_\_\_ Science \_\_\_ Scout Skills \_\_\_ Sports \_\_\_ Archery (must have Archery merit badge) \_\_\_ BBs (must have Rifle Shooting or Shotgun Shooting Merit Badge) \_\_\_ Slingshots  
 \_\_\_ Senior Youth Crew (older youth)

**Scout Training:** Please check yes or no for each one. Have you completed:  
 CPR: Yes \_\_\_ No \_\_\_ First Aid: Yes \_\_\_ No \_\_\_ Volunteered at Dulaney Cub Scout Day Camp: Yes \_\_\_ No \_\_\_ Area \_\_\_\_\_

**Parent/Guardian Information:**

**Emergency Contact (other than parent/guardian):**

Name: \_\_\_\_\_  
 Daytime Phone: (\_\_\_\_\_) \_\_\_\_\_  
 Relationship: \_\_\_\_\_

Name: \_\_\_\_\_  
 Daytime Phone: (\_\_\_\_\_) \_\_\_\_\_  
 Relationship: \_\_\_\_\_

**Fees:** \$15.00 to cover t-shirt, hat and administrative costs  
**T-Shirts:** 1 FREE shirt (Adult sizes). *Remember, a larger shirt is better than one too small!!*  
 Adult: \_\_\_ Small \_\_\_ Medium \_\_\_ Large \_\_\_ Extra Large \_\_\_ Double Extra Large  
 Number of shirts: **1** FREE shirt plus \_\_\_\_\_ additional shirts @ \$10.00/shirt (\$12.00XXL) = \$ \_\_\_\_\_ enclosed.

**Medical Information:** (No one will be allowed in camp without this form!)  
 I have attached the required medical form to this registration. **Initial Here:** \_\_\_\_\_.

Make **one check** for the entire family payable to **BSA/BAC** and attach the check to the **Dulaney Day Camp Family Tally Sheet**.  
 Attach all Individual Application Forms, Medical Forms, and copies of Certification Cards together.

**Troop Leader Awareness:** While we do not require your Scoutmaster or Girl Scout Leader to approve your service to Cub Scout Day Camp, we highly encourage you to make your leader aware that you are taking part in our summer program. This could help you in your advancement opportunities as well as encourage your Troop to participate.

**Community Service:** If you need a specific letter verifying your community service time, please provide any necessary paperwork.

Scout Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_