

CALLING ALL TIGERS, WOLFS, BEARS, AND WEBELOS !

2010 Cub Day Camp

Camp Director: Matthew Shanahan



Who: All Cub Scouts are invited to register if they will be going into the 1st through 5th grade in the Fall of 2010. An experience guaranteed never to be forgotten, and a great investment in your son!

What: Cub Day Camp is the most memorable experience your son will have as a Cub Scout. During their week at camp, they will learn several Scout skills that will help them grow into outstanding citizens in the future and reinforce the values that Scouting has to offer. Your son will understand the importance of community service, environmental conservation, leadership skills, and teamwork. Amidst all the learning, they will have loads of FUN in every minute spent at Camp Miakonda: Archery, Swimming, Scout Skills, BMX Bikes, Nature, Handicrafts, and MUCH MORE!

Where: Cub Day Camp is held at historic Camp Miakonda
5600 W. Sylvania Ave., Toledo, OH 43623 -- just East of Holland-Sylvania Rd.

When: There will be 5 weeks of Cub Day Camp to choose from. Send your son to one week, multiple weeks, or all 5! Camp will be filled with education and fun to keep your son sharp during the summer break from school! The program starts at 8:30 AM, and ends at 4:00 PM. Thursdays continues until after campfire approximately 8:30 PM.

Week 1: June 14-18

Week 2: June 21-25

Week 3: June 28-July 2

Week 4: July 5-9

Week 5: July 12-16

ADDITIONAL PROGRAMS....

Webelos I Weekend: Cubs that will be entering the 4th Grade in the fall are invited to spend a weekend at Camp Miakonda, staying overnight with a parent in selected cabins. Meals are included and activities are designed with the age and abilities of older Cub Scouts in mind. A special solemn ceremony will be held late Saturday night. The weekend occurs July 9-11, but space is limited, so be sure to register soon!

Tiger Twilight: A program designed especially for our newest young Cub Scouts who will be entering the 1st Grade in the fall. This program goes from 5:00 pm to 8:00 pm for three consecutive evenings. Two Tiger Twilights are available and are being held Tuesday, June 22 – Thursday, June 24, and again on July 6-8. At the conclusion of the Tiger Twilight event, new Tiger Cubs are invited to join the Cub Day Camp Thursday night campfire with the rest of the Cub Day Camp Scouts, where they will perform a skit and enjoy the camp-wide festivities all evening long!

REGISTRATION...

Registration packets are mailed to all registered Tiger Cubs and Cub Scouts. We offer discounts for attending multiple weeks, and early-bird registration discounts if you register before May 14th.

Cub Day Camp- Single Week: \$115/week **Additional Weeks:** \$95/each.

Webelos I Weekend: \$60/Includes Scout with Parent

Tiger Twilight I & II: \$45/Includes Tiger with Parent & Thursday Dinner for both.

DISCOUNTS: Early Bird Discount for Cub Day Camp. Save \$15 if you register by May 14th!



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Celebrating the Adventure ★ Continuing the Journey



TIGER TWILIGHT

_____ JUNE 22-24 _____ JULY 6-8

Check In 5:00 PM each day.

Thursday program follows Family Night Schedule

Cost: \$45 per Tiger/Adult Pair
Cost includes Thursday Dinner
Additional Adult Thursday Dinners \$6.50/ea

Fee includes: Patch, T-shirt for Tiger Cub, Thursday Dinner for Tiger and Adult partner, Snacks, Program Supplies.

Tiger Cub Name _____

Address _____

City/State/Zip _____

Birthdate _____ Pack # _____

Phone: _____

Adult Partner Name _____

Relationship: _____

Shirt Size: YSM YMED YLG AS AMED AL

**Open Only to Tiger Cubs entering 1st Grade in Fall 2010.
Please complete health form for each participant.**



WEBELOS I OVERNIGHT

_____ JULY 9-11

Check In Friday, 5:30 PM

Check Out Sunday, 9:00 AM

Cost: \$45 per Webelos I
\$15 per Adult Partner

Fee includes: 5 Meals, T-Shirt, Patch, Water Bottle, and Program Supplies.

Webelos I Name _____

Address _____

City/State/Zip _____

Birthdate _____ Pack # _____

Phone: _____

Adult Partner Name _____

Relationship: _____

Shirt Size: YSM Y MED YLG AS AMED AL

**Open Only to Webelos I Cubs entering 4th Grade in Fall 2010.
Please complete health form for each participant.**



ADULT CDC VOLUNTEER

Week Attending: _____

Must Attend One Training Session:
____ June 10, 5:45-8:30 PM ____ June 11, 5:45-8:30 PM
In Ford Center, Camp Miakonda. Refreshments served.

Name _____

Address _____

City/State/Zip _____

Birthdate _____ Pack # _____

Phone: _____

Email: _____

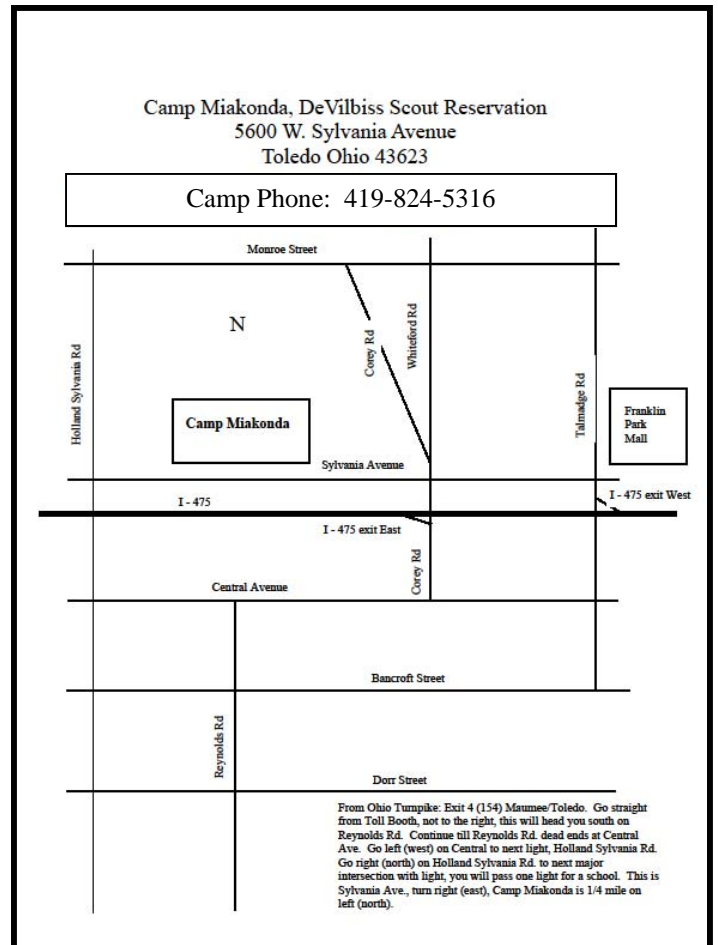
Cub Scout's Name: _____

Relationship: _____

Shirt Size: SM MED LG XL XXL

Volunteer to help for a full week of Cub Day Camp the week your son(s) attend, and receive \$30 off his fee.

Please complete health form for each participant.



PACK _____

2010 CUB DAY CAMP

Registration Form
Erie Shores Council BSA
Please Print Neatly - 1 form per Cub



District _____ Grade (Fall 2010) _____

Rank (Fall 2010 - Circle One): Tiger Wolf Bear Webelos

Name _____

Address _____

City/St/Zip _____

Phone _____

Early bird discount, paid in full by May 14th : Subtract \$15
Late fee, registering within 5 days of camp start: Add \$15
***** 200 Scouts per week limit! Register Now!!! *****

Week 1 (June 14th – June 18th): _____

Week 2 (June 21st – June 25th): _____

Week 3 (June 28th – July 2nd): _____

Week 4 (July 5th – July 9th): _____

Week 5 (July 12th – July 16th): _____

T-Shirt Size: YS YM YL AS AM AL AXL AXXL
(Circle One)

FEES

One Week Fee	\$115	\$ _____
# _____ Add'l Weeks	\$95/week	\$ _____
Camper Meals	\$30/week	\$ _____
Includes Thursday Dinner for Camper		
# _____ Adult Meals	\$6.50 each	\$ _____
# _____ Child Meals	\$4.50 each	\$ _____
Children under 10. Add your camper if not doing Camper Meals		
Early Bird Registration- Subtract \$15		- \$ _____
Register before May 14th		
Late Registration—	Add \$15	\$ _____
Within 5 days of start of desired week		
Volunteer Service	Subtract \$30	- \$ _____
Must volunteer for entire week		
Volunteer Name: _____		

TOTAL ENCLOSED: \$ _____

Check # _____

Visa/MC# _____ Exp.date _____

Name on card _____

2010 CUB DAY CAMP - HEALTH FORM

Erie Shores Council BSA
Please Print Neatly

PACK _____ DISTRICT _____

Rank (Fall 2010 - circle one): Tiger Wolf Bear Webelos

LAST _____ FIRST _____ DOB _____

ADDRESS _____

CITY/ST/ZIP _____

IN CASE OF EMERGENCY, PLEASE NOTIFY:

Parent/Guardian: _____

Home Address: _____

Daytime Phone # _____

Other Parent/Guardian: _____

Daytime Phone # _____

FOLLOWING ARE AUTHORIZED TO PICK UP MY CHILD:

Name _____ Relationship _____

Phone # _____

Name _____ Relationship _____

Phone # _____

Name _____ Relationship _____

Phone # _____

PHYSICIAN INFORMATION

Family Physician _____ Phone _____

Family Dentist _____ Phone _____

Health Insurance Co. _____ Group# _____

Policy Number/ID _____

MEDICAL HISTORY AND RESTRICTIONS

Circle any that apply, with specifics and/or restrictions

ADD _____ ADHD _____ Asthma _____

Cancer _____ Convulsions _____ Diabetes _____

Heart Disease _____ Hemophilia _____ High Blood Pressure _____

Leukemia _____ Sting Reactions _____ Other: _____

Allergies – Please List: _____

*****PLEASE COMPLETE CLASS A & C MEDICAL FORMS*****

**ERIE SHORES COUNCIL
BOY SCOUTS OF AMERICA
P O 8728
TOLEDO OH 43623-0728**

**NON-PROFIT ORG
U S POSTAGE
PAID
TOLEDO OH
Permit 525**

**Annual Health and Medical Record
(Valid for 12 calendar months)
Medical Information**



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The Boy Scouts of America recommends that all youth and adult members have annual medical evaluations by a certified and licensed health-care provider. In an effort to provide better care to those who may become ill or injured and to provide youth members and adult leaders a better understanding of their own physical capabilities, the Boy Scouts of America has established minimum standards for providing medical information prior to participating in various activities. Those standards are offered below in one three-part medical form. Note that unit leaders must always protect the privacy of unit participants by protecting their medical information.

Parts A and C are to be completed annually **by all BSA unit members**. Both parts are required for all events that do not exceed 72 consecutive hours, where the level of activity is similar to that normally expended at home or at school, such as day camp, day hikes, swimming parties, or an overnight camp, and where medical care is readily available. Medical information required includes a current health history and list of medications. Part C also includes the parental informed consent and hold harmless/release agreement (with an area for notarization if required by your state) as well as a talent release statement. Adult unit leaders should review participants' health histories and become knowledgeable about the medical needs of the youth members in their unit. This form is to be filled out by participants and parents or guardians and kept on file

MEDICATION MUST BE LEFT IN CAMP OFFICE – EXCEPT FOR PERSONAL INHALER AND/OR EPI-PEN		
Will Scout need medication at camp?	YES	NO
Medications: _____		
Schedule & Dose: _____		
*Attach photo of child to both health form and medication container when medication is to be administered during camp.		

DATE RECEIVED (Office Use Only):