

# APPENDIX



*Cabins at Sour Grass*

## Troop Registration Form



# 2017

### 2017 Boy Scout Resident Camp Troop Registration Form

*This form is for troops to reserve patrol sites at camp for 2017. Do not use it for individual payments. Pay by troop, not individual.*

Troop # \_\_\_\_\_ Council (not District) \_\_\_\_\_ Date \_\_\_\_\_

Week (circle one)    Wk 1 June 18-24    Wk 2 June 25-July 1    \*Wk 3 July 2-8    Wk 4 July 9-15    Wk 5 July 16-22

Troop representative \_\_\_\_\_ Position \_\_\_\_\_  
*This is the person that will receive all communication regarding C.J.M.*

Mailing address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Primary phone (Circle H B M ) \_\_\_\_\_ Alt. Phone (Circle H B M ) \_\_\_\_\_

Email address (print clearly) \_\_\_\_\_

*Please use an account which is checked regularly. We rely heavily on email for pre-camp communications.*

\*Wk 3 of camp will also be a Webelos Camp week.

<b>Arrival Time</b> <small>(Check One)</small>	<input type="checkbox"/> Regular, Sunday 1 - 3pm <input type="checkbox"/> Saturday, _____ pm <input type="checkbox"/> Monday, 6am <small>Saturday arrival does not include food or program—only the patrol site(s).</small>		
<b>Projected Number Attending</b>	Scouts _____	Adults _____	(PATROL SITE = roughly 8 Scouts & 2 Leaders) <small>Numbers may be adjusted down the road—this is to help place you in a patrol site(s) that fits your troop.</small>
<b>Campsite, # of Patrol Sites Desired</b>  <small>See map on back - indicate preferences; we cannot guarantee desired sites will be available</small>	1st choice _____	Total # Patrol Sites Needed <span style="border: 1px solid black; display: inline-block; width: 40px; height: 20px; vertical-align: middle;"></span>	
	2nd choice _____		
	3rd choice _____		
	<small>Two-person tents are provided for all Scouts. Each tent will have two blue foam pads. If your number exceeds your capacity for a campsite you may reserve part or all of a second, nearby campsite or bring personal tents to supplement. If you plan to share your campsite with another unit please indicate below:</small> Sharing site with Troop# _____ Leader name _____		
<b>Deposit</b>  <small>Use this form only for camp deposits, not payment of other camp fees.</small>	A \$100 deposit <i>per patrol site</i> is due with this form to hold your reservation request. Reservations are not firm until payment is received. The deposit will be applied toward camp fees. All deposits are non-refundable after 12/1/2016.		
	<input type="checkbox"/> Enclosed is our \$ _____ deposit (checks payable to GYC) <input type="checkbox"/> Charge the credit card below <input type="checkbox"/> Charge our \$ _____ deposit to our Greater Yosemite Council Unit Acct. Troop# _____		
CC# _____ - _____ - _____ - _____	Exp Date ____ / ____	V-code _____	<small>(3-4 digits on back)</small>
Name _____	Signature _____		

<b>2017 Fee Structure</b>	<small>These fees are for reference only. This is not a payment form for campers or leaders. Use this form for troop reservations only.</small>		
	Scouts	Leaders	New Scouts or Bridged Webelos
<b>Super Early Bird:</b> By March 31 st, 2017	\$335	\$150	\$335
<b>Early Bird:</b> After 3/31 and by May 1 st, 2017	\$345	\$160	\$335
<b>Regular Fee:</b> After 5/1 and no later than 2 wks before camp session	\$355	\$170	\$335
<b>On-Arrival Fee:</b> from within 2 weeks of 1 st day of your camp	\$365	\$180	\$345
<b>Leader One-Night Fee:</b> for overnight stay in camp		\$40	

**Submit completed form to Greater Yosemite Council, BSA 4031 Technology Dr Modesto, CA 95356**

Telephone 209.545.6320    Fax 209.545.6321    E-mail [info@yosemitescouting.org](mailto:info@yosemitescouting.org)

**Refund Policy:** All fees are non-refundable with the exception of summer school, a death in the immediate family, or a doctor's excused illness in which all but \$175 (Scout) and \$85 (Adult) will be refunded. Requests must be submitted in writing with appropriate documentation (i.e., doctor's excuse or summer school enrollment verification). Refund requests must be submitted not later than **September 1st, 2017.**

## Troop Payment Form

2017



## 2017 Boy Scout Resident Camp Troop Payment Form

Pay by troop, not individuals. Include this form with any and all payments (excluding Reservation deposits).  
Use a new form for each payment. Don't reuse form previously submitted.

Troop # \_\_\_\_\_ Council (not District) \_\_\_\_\_ Date \_\_\_\_\_

Week (circle one) Wk 1 June 18-24 Wk 2 June 25-July 1 Wk 3 July 2-8 Wk 4 July 9-15 Wk 5 July 16-22

Troop representative making payment \_\_\_\_\_

Phone (Circle H B M ) \_\_\_\_\_ Email address (print clearly) \_\_\_\_\_

Payment Method (circle one)	CASH	Check# _____	CC	Online	Unit Acct
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## Payment Breakdown:

Deadline Info	Payment Type	Amount	# Participants	Sub totals
<i>Min due to sign up for merit badges</i>	<input type="checkbox"/> Scout Deposit	\$180	X	=
<i>Super Early Bird Payments must be received/post-marked by midnight 3/31/2017.</i>	<input type="checkbox"/> Scout Super Early Bird	\$335	X	=
	<input type="checkbox"/> Adult Super Early Bird	\$150	X	=
	<input type="checkbox"/> Scout FOS Gold Unit Super Early Bird	\$325	X	=
<i>Early Bird Payments must be received/post-marked by midnight 5/1/2017.</i>	<input type="checkbox"/> Scout Early Bird	\$345	X	=
	<input type="checkbox"/> Adult Early Bird	\$160	X	=
	<input type="checkbox"/> Scout FOS Gold Unit Early Bird	\$335	X	=
<i>Payments must be received/post-marked prior to 2 wks before camp session.</i>	<input type="checkbox"/> New Scout/Bridged Webelos	\$335	X	=
	<input type="checkbox"/> Scout Regular	\$355	X	=
	<input type="checkbox"/> Adult Regular	\$170	X	=
<i>Payments received/post-marked during 2 wks prior to camp session.</i>	<input type="checkbox"/> New Scout/Bridged Webelos On-Arrival	\$345	X	=
	<input type="checkbox"/> Scout On-Arrival	\$365	X	=
	<input type="checkbox"/> Adult On-Arrival	\$180	X	=
<i>"Tag-team" Adults register as 1 Adult</i>	<input type="checkbox"/> Adult Partial Week	\$40	X	# of Nights: =
Total Payments/credits previously applied:			Subtract this amount	( )

Name Scouts and Adults associated with payment on 2nd page of form.

Name Scouts and Adults associated with payment on 2nd page of form.

Submit completed form to Greater Yosemite Council, BSA:

4031 Technology Dr Modesto, CA 95356

Total Payment being made: \_\_\_\_\_

Phone 209.545.6320 | Fax 209.545.6321 | E-mail [info@yosemitescouting.org](mailto:info@yosemitescouting.org)

Office Use: Payment postmarked/received/made: \_\_\_\_\_ Payment applied in DK: \_\_\_\_\_ by \_\_\_\_\_

**Refund Policy:** All fees are non-refundable with the exception of summer school, a death in the immediate family, or a doctor's excused illness in which all but \$175 (Scout) and \$85 (Adult) will be refunded. Requests must be submitted in writing with appropriate documentation (i.e., doctor's excuse or summer school enrollment verification). Refund requests must be submitted not later than **September 1st, 2017**.

Revised 3.8.17



**Roster for Unit \_\_\_\_\_**

Prepare in 3 copies

1 for Camp Administration, 1 for Health Officer, 1 for Scoutmaster

Due at check-in – COMPLETE ALL INFORMATION.

Unit # \_\_\_\_\_

Council \_\_\_\_\_

PLEASE PRINT

THIS ROSTER IS FOR SCOUTS \_\_\_\_\_ ADULTS \_\_\_\_\_

*Make copies of this form as needed*

	Phone	D.O.B.	M	C
Name _____ Address _____ City _____ St. _____ ZIP _____				
Name _____ Address _____ City _____ St. _____ ZIP _____				
Name _____ Address _____ City _____ St. _____ ZIP _____				
Name _____ Address _____ City _____ St. _____ ZIP _____				
Name _____ Address _____ City _____ St. _____ ZIP _____				
Name _____ Address _____ City _____ St. _____ ZIP _____				
Name _____ Address _____ City _____ St. _____ ZIP _____				
Name _____ Address _____ City _____ St. _____ ZIP _____				

M = Annual Health and Medical Record / C = Authorization and Consent Form

Page \_\_\_\_\_ of \_\_\_\_\_

## Adult Tracker

Complete and submit if your unit is sending adults who are not coming for the entire week. See example below

Adults	Name	Sunday	Monday			Tuesday			Wednesday			Thursday			Friday			Saturday	Fees
			B	L	D	B	L	D	B	L	D	B	L	D	B	L	D		
1																			
2																			
3																			
4																			
5																			
6																			
7																			
8																			
9																			
10																			
11																			
12																			
13																			
14																			

**Total adults in camp:**

**Adult Tracker Example:**

Adults	Name	Sunday	Monday			Tuesday			Wednesday			Thursday			Friday			Saturday	Fees
			B	L	D	B	L	D	B	L	D	B	L	D	B	L	D		
1	Joe Schmo*																		FREE
2	Billy Bob Thornton*																		85
3	Mean Joe Green								\$	\$									85
4	Baden Powell*											\$	\$						85
5	Martha Stewart																		85
6	Captain Crunch*																		170
7																			
8																			
9																			
10																			
11																			
12																			
13																			
14																			

**Total adults in camp:**

	4	4	4	4	4	4	4	4	5	5	4	5	5	4	4	4	4	4	4	510
--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	-----

The shaded boxes indicate extra fees will be due

- \*Adults checking in on Sunday (or Monday morning in the case of LDS units) MUST be named in the DoubleKnot registration system.
- ~ In this example the unit has qualified for one free adult due to the number of registered Scouts
- ~ ALL adults must bring with them completed Medical Forms Parts A and B, and those who are staying more than 72 hours MUST also have Part C completed and signed by an MD/DO/PA/NP or any other primary health care provider.

## ***Pre-Departure Checklist for Unit Leaders***

*Make copies of this form as needed*

#	Youth Names	Fee Paid	Med/Climbing Consent	Firearms Release x 2	Medical Form Parts A, B & C	Merit Badge Signup
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
32						
33						
34						

## Merit Badge Pre-Sign-up Worksheet

Use this to gather your Scouts' class choices before logging into the DoubleKnot system to sign them up.

*Make copies of this form as needed*

#	Scout Name		Monday	Tuesday	Wednesday	Thursday	Friday	
		1 <sup>st</sup> choice	9-11	9-11	9-11	9-11	9-11	
			1-3	1-3	1-3	1-3	1-3	
			3-5	3-5	3-5	3-5		
		2 <sup>nd</sup> choice	9-11	9-11	9-11	9-11	9-11	9-11
			1-3	1-3	1-3	1-3	1-3	1-3
			3-5	3-5	3-5	3-5	3-5	
		1 <sup>st</sup> choice	9-11	9-11	9-11	9-11	9-11	
			1-3	1-3	1-3	1-3	1-3	
			3-5	3-5	3-5	3-5		
		2 <sup>nd</sup> choice	9-11	9-11	9-11	9-11	9-11	9-11
			1-3	1-3	1-3	1-3	1-3	1-3
			3-5	3-5	3-5	3-5	3-5	
		1 <sup>st</sup> choice	9-11	9-11	9-11	9-11	9-11	
			1-3	1-3	1-3	1-3	1-3	
			3-5	3-5	3-5	3-5		
		2 <sup>nd</sup> choice	9-11	9-11	9-11	9-11	9-11	9-11
			1-3	1-3	1-3	1-3	1-3	1-3
			3-5	3-5	3-5	3-5	3-5	
		1 <sup>st</sup> choice	9-11	9-11	9-11	9-11	9-11	
			1-3	1-3	1-3	1-3	1-3	
			3-5	3-5	3-5	3-5		
		2 <sup>nd</sup> choice	9-11	9-11	9-11	9-11	9-11	9-11
			1-3	1-3	1-3	1-3	1-3	1-3
			3-5	3-5	3-5	3-5	3-5	
		1 <sup>st</sup> choice	9-11	9-11	9-11	9-11	9-11	
			1-3	1-3	1-3	1-3	1-3	
			3-5	3-5	3-5	3-5		
		2 <sup>nd</sup> choice	9-11	9-11	9-11	9-11	9-11	9-11
			1-3	1-3	1-3	1-3	1-3	1-3
			3-5	3-5	3-5	3-5	3-5	

*This form is for unit use only in tracking their merit badges. Actual sign-ups are done online, not at camp.  
Adjustments/changes can be made at camp.*

## Unit Swim Check Roster

*Make copies of this form as needed*

Troop # \_\_\_\_\_ Council/District \_\_\_\_\_

Scoutmaster Name: \_\_\_\_\_ Swim Check Instructor: \_\_\_\_\_

\_\_\_\_\_  
Scoutmaster's Signature

\_\_\_\_\_  
Date

Please check the appropriate box for each person, Swimmer, Beginner or Non-Swimmer.

NAME <i>Please print legibly</i>	Date Swim Check Completed	Swimmer	Beginner	Non- Swimmer
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**BSA Swimmers Test:** Jump feet first into water over head and the swim 3 laps of 25 yards each lap using any stroke; 1 lap of 25 yards using the elementary backstroke and Float motionless on their back one minute without sinking.

**BSA Beginners Test:** Jump feet first into water overhead, surface and swim 25 feet with a strong stroke. Turn around and swim 25 feet back to the starting point.





**Parent or Legal Guardian**  
***Permission and Release Form for Minor to Use Firearms***  
**and Ammunition in California**

I, \_\_\_\_\_, parent or legal guardian of \_\_\_\_\_  
(Print name of Parent or Legal Guardian) (Print Name of Scout)

hereby give my child express permission and consent to be lent and possess firearms (handguns and long guns) and ammunition to engage in lawful, recreational sport. (Cal. Penal Code 27945, 29610, 29615, 29650, 29655, 18 U.S. C. 922(x)). As used in this form, “firearms” include any handguns, long guns, or shotguns that may lawfully be loaned to and possessed by a minor under state and federal law. I also give my child express permission and consent to possess, and for a person to loan to my child, a “BB device” as defined in Cal. Penal Code 16250. (Cal. Penal Code 19915).

This consent is valid, absent my express revocation thereof, for fourteen days from the date of my signature. A photocopy or facsimile of this written consent will serve as an original. This written consent form must remain in my child’s possession at all times while he or she possesses any firearms or ammunition and a copy of it must be kept at the shooting range as well.

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date

**[Bring TWO copies of this form to camp]**

**Youth Release Request / Release of Campers  
Verification of "No Shows"**

Any camper who leaves camp property during camp session must have a completed release requests that is turned in to the Camp Director or the Program Director.

A written letter to all unit leaders goes out prior to camp stating that responsibility for the units to transport campers to and from camp lies with the unit.

The unit leader is responsible to get a camper to camp, secure any necessary youth release requests and the tour permit, if applicable.

All units prior to arrival at camp give the number of youth attending camp. This will be checked at check-in and any discrepancy must be verified by the unit leader. If the location of the missing youth is unknown, then the unit leader in conjunction with the Camp Director will call the parents of the youth to verify the youth's location.

**RELEASE OF CAMPERS**

As the legal guardian of, \_\_\_\_\_ I grant permission for him/her to leave camp with the following people:

Name \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

By signing this form, I release the Council and Camp of Liability once my son has left camp with the above listed people.

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date

***Unit Checkout Form***

**Campsite** \_\_\_\_\_ **Unit #** \_\_\_\_\_

- \_\_\_\_\_ 1. Remove all troop and personal equipment from tents and campsite.  
Equipment should be placed on the side of the road.
- \_\_\_\_\_ 2. Clean campsite and restroom assigned to troop.
- \_\_\_\_\_ 3. Leave garbage in can with lid secured – ranger will pick up
- \_\_\_\_\_ 4. Check troop box in Scoutmaster lounge building for blue cards, partials, woodsman forms
- \_\_\_\_\_ 5. Return all camp equipment to commissary

Commissary staff member's signature: \_\_\_\_\_

- \_\_\_\_\_ 6. Clear all financial responsibilities pick up troop medical forms, records, and camp patches.
- \_\_\_\_\_ 7. Turn in evaluation forms.

Campsite Commissioner's Signature: \_\_\_\_\_

Unit Leader's signature: \_\_\_\_\_

Camp Director's signature: \_\_\_\_\_

**Have a safe trip home and see you next year.**