

**Boy Scout/Venturer Scout Volunteer Registration Form
Scripps-Mesa Twilight Camp**

Scout's name: _____

Mother's Name _____ Father's Name _____

Unit number: _____ Birth Date: _____

I am volunteering to help with Scripps-Mesa Twilight Camp (July 19-July 23, 2010) on the following days (please circle days you can work):

Mon. ~ Tue. ~ Wed. ~ Thurs. ~ Fri.

T-shirt size (please circle one):

Child Med. ~ Child Lg. ~ Adult Small ~ Adult Med. ~ Adult Lg. ~ Adult XL ~ Adult XXL

Street/Apt #: _____

City _____ State _____ Zip code _____

Home phone: _____ Cell: _____

E-mail(s) _____

Camp activities include the use of wristrocket slingshots, physical sports and games. If your child cannot participate in any of the activities please list any restrictions.

Youth Staff should arrive by 3:15 PM every day, and be able to stay until 8:00 PM.

The following adults are allowed to pick up my child from Twilight Camp:

Name	Phone
1. _____	_____
2. _____	_____
3. _____	_____

The following is required by BSA for all youth:

BSA Registration #: _____

Health and Medical Record form (include with registration form)

Mail completed forms to: **Scripps-Mesa Twilight Camp
11270 Calle Jalapa, San Diego, CA 92126-1214**

Signature/date of parent/guardian _____

THANK YOU FOR VOLUNTEERING!