

Camp Rotary

Application for Summer Camp Reservation 2010

Troop # _____

Name of Summer Camp Leader #1*: _____

Address _____ City _____ Zip _____

Day Phone # _____ Evening Phone # _____

E-Mail Address _____

Council Name _____

Name of Summer Camp Leader #2: _____

Address _____ City _____ Zip _____

Day Phone # _____ Evening Phone # _____

E-Mail Address _____

* Please fill in the information for the person who will be attending summer camp;
all mailing and information will be sent to this person.

Our troop would like to request the following week to attend: _____

Our troop would like to request the following campsite: _____

We plan on bringing the following number of campers: _____ Youth

_____ Adult

Unit Leader Signature

We understand that summer camp reservations are on a first-come, first-served basis & agree to all follow all Local, State, Federal, & BSA policies while at Camp Rotary. We have enclosed our deposit of \$100 and understand that our reservation will not be made without enclosing the deposit.

We understand that upon receipt of our *Application for Summer Camp Reservation* and our \$100 deposit, we will be sent confirmation of our reservation. We also agree to the *Summer Camp 2010 Payment Schedule* for the remaining balance of our fees and further understand that failure on our part to adhere to the payment schedule will void our reservation.

Please mail completed reservation form to:

Lake Huron Area Council
P.O. Box 129
Auburn, MI 48611-0129

(office use only #6671)

Date Received at Service Center _____ Amount Received _____ Check # _____