

Friends of Scouting Leader Fantasy Camp

September 9-11, 2011



Camp Rotary
Clare MI

The Lake Huron Area Council is pleased to announce a very special weekend for some very special people; our Friends of Scouting Supporters! For a Unit to qualify for this special family weekend camp package, the following FOS unit benchmarks must be met:

1. Conduct a Family FOS Presentation in your Unit
2. Qualify for "Free Cloth Rank Advancement"* by March 30, 2011

*50% Family participation required & Unit FOS Goal must be achieved

Qualifying Units will choose 2 families to be our guest at Camp Rotary for the weekend at no charge as our way of saying "Thank You" for your support of the Scouting program in the Lake Huron Area Council! Additional families from a qualifying unit may also attend the *FOS Leader Fantasy Camp* for only \$10 per person or a family maximum of \$50. To register your family for this outstanding opportunity, please complete the reservation form below and return by August 29, 2011. Questions? Please call the Service Center at 989-662-4464 or e-mail to info@lhacbsa.org. The first 64 participants registered will be lodged in our Doan Conference Center. In addition to lunch, activities for the whole family on Saturday include:

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| <ul style="list-style-type: none"> • Rifle • Shotgun • Archery | | <ul style="list-style-type: none"> • Fishing • Hiking • BB Guns | | <ul style="list-style-type: none"> • Climbing/Rappelling Tower • Boating • Camp Tours | |
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For families staying the weekend, check-in begins at 5 pm Friday and checkout is by 3 pm on Sunday. Saturday lunch is provided, & you will need to bring sleeping bag/bedding, toiletries, and appropriate clothing for the weekend.

FOS Leader Fantasy Camp at Camp Rotary

Please send this form by August 29, 2011 to:
L.H.A.C., PO Box 129, Auburn, MI 48611-0129
\$10 per person / \$50 family maximum

Name _____ Unit# _____

Address _____ City _____

Zip _____ E-Mail _____

Home Phone _____ Work Phone _____

Visa, MC, Disc # _____ V Code _____ Exp. Date _____
(3-digit number on back of card)

Signature for Card _____

Please indicate the number attending: _____ Youth / _____ Adults Amount Enclosed \$ _____

You may also fax your registration by including your credit card information to 989-662-4465 or register online at <http://www.lhacbsa.org/>

(office use #6950)