<u>Cub / Boy Scout</u> <u>BBQ Form</u> Join us for a BBQ, Campfire, and FUN!

The activities for the night will include dinner, dessert Who: Scouts, Parents, Siblings and Guests When: Thursday Night Cost: Campers are FREE \$10.00 per adult 5.00 Per child 5 and under FREE



Campers who are joining us for the BBQ will <u>stay at camp</u> for additional camp activities and will be released to parents/guardians at 5:30 when you arrive. Campers who are not staying for the BBQ will be dismissed at the normal time.

What's for Dinner? (Dinner is subject to change)

- Hot Dogs & Hamburgers
- Side dishes
- Chips
- Drinks
- Dessert

Please fill out the attached form and return it with payment by the first day of camp.

Name of Camper: _____

Week Attending Camp: _____

_____ No, sorry we cannot attend the Thursday evening BBQ

_____ Yes, we will be attending the Thursday evening BBQ

Day camper(s) _____ FREENumber of Adults _____ @\$10.00 per person = \$_____Number of Children _____ @\$5.00 per person = \$_____Number of Children under 5 _____ FREETotal Attending _____ Total Cost = \$_____





Boy Scouts of

Hudson Valley Council America

CUB SCOUTS/ BOY SCOUTS CAMPER DISMISSAL PROCEDURE

Please read this form carefully and return prior to camp.

In accordance with the BSA standards and New York Department of Health guidelines, the camp staff has developed the following procedure for dismissing the campers at the end of the day. This procedure was designed to ensure the safety of your child. At the bottom of this page you will be asked to list all the people, including yourself that have permission to pick up your child from Day Camp. If someone shows up at camp to pick up your child and are not on the list they will not be released until the proper person is called and gives permission. If someone is not on the list and will be picking up your child you may send in a signed note the day of the pickup. Please realize that we are doing this for your child's safety and the safety of all campers.Please wait until the Dens are officially dismissed. There will be a closing ceremony every day. If your child is getting picked up please STOP at the stop sign and we will come over to the car to dismiss your child to you. Your name will be checked against the approved list. A picture ID, of the adult picking up your child, will be asked for. **Please bring an ID with you**. Please do not pull into the parking lot or exit your car to assure safety of everyone. If your child rides the bus they will be put on the bus at this time.THANK YOU FOR YOUR UNDERSTANDING AND COMPLIANCE

CAMPER DISMISSAL FORM

Day Camper Full Name (Please Print):		_
Parent/Guardian Name (Please Print):		
Phone: (Home):	(Business):	

The following individuals are authorized to pick my child up from the Cub Scout Day Camp Premises.

Name	Phone
Relationship to Camper	
Name	Phone
Relationship to Camper	
Name	Phone
Relationship to Camper	
Name	Phone
Relationship to Camper	

Hudson Valley Council

Boy Scouts of America

<u>CUB SCOUTS/ BOY SCOUTS</u> <u>Transportation</u>

At Camp Bullowa we offer bussing to and fro are both an additional \$75. Please fill out this form and check off the co	om camp as well as early drop off and pick up. These options prrect boxes.
Camper's Name	
Parent/Guardian Name	Cell Phone:
	Work Phone:
\square I will be dropping off and picking up my ch	nild at regular time
 I will be dropping off and picking up my ch (Please write the times below) 	nild at early or late pickup times
AM	PM
(Please write the times below)	

I will be using the bus as transportation for my child
 Stop I will be using to drop off and pick up my child______