2015 WINTER CAMP

at CAMP 3 FALLS (Ventura County Council, BSA)

RESERVATION FORM

(Boy Scouts, Varsity Scouts, Sea Scouts & Venturers Only)

SESSION	DATE	HOST TROOP(S)
#1	**January 9 - 12**	**Troop 805**
#2	**January 23 - 25**	**Troop 642 & Troop 689**
#3	**February 6 - 8**	**Troop 262**

COST: **$35.00** per person. Includes 3 meals Saturday, breakfast Sunday, Cracker Barrel Friday and Saturday nights, and a Winter Camp Memento.

RESERVATIONS: Payment in full is required with all reservations. The reservation fee is transferable within Winter Camps but only 50% will be refunded for a cancellation.
All cancellations must be made in writing 2 weeks in advance for refunds.

GENERAL INFORMATION:

1. **Winter Camp is an activity for Boy Scouts, Varsity Scouts, and Venturers** to share the experience of cooler and possible inclement weather camping. The campers are welcome to arrive Friday night, there will be no meal served, but a Cracker Barrel will be provided.

2. All campers are expected to be in camp for all meals on Saturday and Sunday unless the kitchen and/or Cooks are notified in advance. This is to assure that extra food isn't prepared and then wasted. Meal times are:
   Saturday: Breakfast *7:30 - 8:30 a.m.,* ***Lunch*** *12:00 -1:00 p.m.,* ***Dinner*** *5:30 - 6:30 p.m.* ***Sunday: Breakfast*** *7:30 - 8:30 a.m.*

3. All persons in attendance at Camp Three Falls on designated weekends **must** have reservations made through the Scout Service Center.

4. Reservations will be made to a maximum of 150 campers each weekend, including boys and adults.

5. All units are REQUIRED to file a Tour & Activity Plan.

6. No indoor sleeping accommodations are available. Each camper is to provide their own tent. Remember BSA policy prohibits a boy and adult sharing the same tent unless they are directly related.

7. ACCIDENT INSURANCE is provided by the Council. As it is with most group insurance policies, the Council insurance is secondary coverage; therefore, the initial claim is to be made against the family's personal medical insurance.

NOTE: *Temperatures can go as low as 10ºF. Your Scouts and their parents should be aware of this and that all sleeping is done outdoors in their own tents. Because of unpredictable weather conditions all campers should be prepared with an extra change of clothes. It is strongly recommended that the campers do not wear tennis shoes for winter conditions.*

2014 WINTER CAMP RESERVATION ***ACCT# 1-6701-703-21***

SESSION #_____ UNIT #_____ COUNCIL _____

# of Boys _____ # of Adults_____ Enclosed: #_____x **$35** = $ _____

Please Mail Completed Form and Full Payment to:
Ventura County Council, BSA
509 East Daily Drive
Camarillo, CA 93010

_____ _____ _____
Leader Name (Please Print) Cell or Daytime Phone Number E-Mail Address

_____ _____ _____
Address City Zip Code

I am aware that as the unit leader for Winter Camp it is my responsibility to have Parent Consent and Medical History Forms for each Scout in my possession. Additionally, I understand that I must file a Tour & Activity Plan with the Council Service Center.

_____ _____
Leader Signature Date