

Spring Event Registration Form

*To register online or to print additional registration forms,
visit www.cfcbasa.org and click on 'activities'.*

Select your event and date: One event per registration form, please.

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| <input type="checkbox"/> Webelos Adventure (F080)
<input type="checkbox"/> January 25-27

<input type="checkbox"/> Cub Spring into Spring (F022)
<input type="checkbox"/> April 4-6 (E4) | <input type="checkbox"/> Fun with Son (F065)
<input type="checkbox"/> April 11-13 (C3)
<input type="checkbox"/> April 25-27 (E3) |
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One family per registration form, please.

Scout's Name:	Scout's Birthdate:	
Accompanying Parent/Guardian Name(s): <i>Note: At least one parent or guardian must attend the event with the Scout.</i>		
Home Phone:	Daytime Phone:	
Address:		
City, State, Zip:		
Pack No.:	Email:	
Special Needs (wheelchair, medical, etc.):		
(Please circle one)		
Using own tent	Using camp tent	Not camping
Program Fee <i>(includes optional use of tent and cot)</i> : \$18.00 x ___ person(s) = \$_____		
Friday Evening Meal Deal \$4.00 x ___ person(s) = \$_____ (hamburger or hot dog or pizza, chips, drink)		
Meals <i>(if you wish to purchase meals, please complete this section; or you may cook your own meals)</i> :		
Sat. Breakfast \$4.50 x ___ person(s) = \$_____ Sun. Breakfast \$4.50 x ___ person(s) = \$_____		
Sat. Lunch \$4.75 x ___ person(s) = \$_____ All four meals \$18.00 x ___ person(s) = \$_____		
Sat. Dinner \$5.75 x ___ person(s) = \$_____ Total cost for meals = \$_____		
TOTAL FEES <i>(add program fee total and meal total)</i> : \$ _____		

Make checks payable to Central Florida Council and mail to: Wayne Densch Boy Scout Service Center, 1951 S. Orange Blossom Trail, #102, Apopka, FL, 32703. If paying my MasterCard or Visa, you may also fax this form to 407-889-4406 or **you may register online at <http://www.cfcbasa.org>** (click on 'activities').

Cash or Check	Check #:	Amount:
Mastercard/Visa #:		
Exp. Date:		Signature:

Due to high attendance, no admittance without advance registration!