

APOCALYPSE TUNNEL MILL

2/9 - 2/11 2018

HOW WILL YOU SURVIVE?

created an army of mutated...
bunnies. ALL LHC Scout
Patrol are reques...
to ready their Surviv...
Emergency Dragste...
report to...Tur...
in February.

For more information, contact Dan Waddell at:

502-243-5203

cpt.kydd@outlook.com

L&C Post Apocalyptic Weekend

Feb 9-11, 2018

This form needs to be fully completed and submitted prior to January 1, 2018 to have an accurate count and assign campsites large enough to accommodate your Unit's needs. Please provide a roster of everyone that will be camping with your unit. If you are unable to pre-register before the beginning date of the event, you will need to bring a copy of this form at check-in before entering Camp. ***Units that pre-register should photocopy their completed form before submitting it to the Council Office and bring it to check-in.*** Paper registrations may be mailed, faxed, or e-mailed to the contacts listed below.

Leader's Guide Available at lhbsa.org

COST: Youth - \$10.00 before 1/25/2018, \$13.00 after 1/25/2018
 Adult - \$8.00 before 1/25/2018, \$11.00 after 1/25/2018

Unit Type and #: _____ **DISTRICT:** _____

UNIT LEADER NAME: _____

MAILING ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE: _____

EMAIL: _____

TOTAL YOUTH: _____

TOTAL ADULTS: _____

METHOD OF PAYMENT:

(Credit Card, Check, Cash)

Name on Credit Card: _____ Billing Address: _____ City: _____ State: _____ Zip: _____ Amount to be charged: _____ Credit Card Number: _____ Card Expiration Date: _____ CVC (Code on back of card): _____
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Mail this in:
 Lincoln Heritage Council
 12001 Sycamore Station Place
 Louisville, KY 40299

Fax this in:
 502-361-7899
 Email this in:
 Lauren.Kern@scouting.org

Youth Name(s) (First and Last)
1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25

Adult Name(s) (First and Last)
1
2
3
4
5
6
7

Any Questions? Contact:
Katie Glesing
(502) 400-5360
Katie.Glesing@scouting.org

Account Number:
 1-6801-015-20

Post Apocalyptic Wilderness Survival Camp 2018 Roster

This form needs to be fully completed and submitted **NO LATER THAN January 26, 2018**

If Youth is a Scout, please just fill out First and Last Name: If the youth is a sibling, add an (s) after the name.

Unit Number: _____

District: _____

Youth Name (First and Last)	Camping Friday	Camping Saturday	Scout or Webelos
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Youth Total ____ x \$10.00 = \$ ____	(Before 1-1-18)		
Youth Total ____ x \$13.00 = \$ ____	(After 1-1-18)		
Use back of this page for additional Scouts and Leaders			
Adult Name (First and Last)	Camping Friday	Camping Saturday	Saturday Events Only
1			
2			
3			
4			
5			
Adult Total ____ x \$8.00 = \$ ____			

Total amount paid: _____

Date Paid: _____