



LHC VENTURING OFFICERS ASSOCIATION

KODIAK CHALLENGE

May 4, 5, & 6

Harry S. Frazier, Jr. Scout Reservation
Leadership Development Center

Calling all Venturers and Boy Scouts 14 or older! Are you looking for a chance to put your skills learned at ILSC, ILST, or NYLT into practice? We have a great opportunity for you coming this fall! The KODIAK CHALLENGE course provides you with the opportunity to hone your skills in a unique trail-based experience. Kodiak presents 5 challenges during the course that focus around leadership skills and team building exercises that will occur as we hike along the 7 arrows trail at Camp Crooked Creek. We are currently accepting registrations for this fall. Want to be on staff? We are currently looking for staff for the 2018 courses. In order to be on staff, you must have attended a Kodiak Challenge in the past. Attending this fall is a great way to secure a spot and qualify to be on next year's staff! More info to come but be sure to register today! Space is limited for this course!

Looking to support the Kodiak Challenge? We have a limited edition Council Strip Patch available for purchase. Every purchase will help to fund scholarship assistance for scouts to attend the course!

Cost:

\$25.00 per person in attendance.

\$5.00 per limited edition CSP →



Contact Information:

Todd Moyes, Course Director

812-989-7491

eagle_bear@outlook.com

Matt Nash

502-400-5372

matt.nash@scouting.org

Registration information on back.

Complete the registration form and send to the Sam Swope Scout Center:

Attn: Kodiak Challenge
12001 Sycamore Station Place
Louisville, Kentucky 40299
Phone: (502) 361-2624 Fax: (502) 361-7899
Registration is available online at lhcbasa.org

2018 Kodiak Challenge: 4-6 May 18

COST: \$25.00 per person

Limited Edition CSP: \$5.00 per Patch

Unit Type: Troop #: _____ Crew #: _____

Scouter Completing Form: _____

Mailing Address: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____

EMAIL: _____

TOTAL YOUTH: _____ X \$25.00 = _____

TOTAL LIMITED EDITION CSP: _____ X \$5.00 = _____

GRAND TOTAL: _____

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): _____

Youth Name(s)
1
2
3
4
5
6
7
8
9
10
11
12
13
14
15

Mail this in: Lincoln Heritage Council 12001 Sycamore Station Place Louisville, Ky. 40299
Fax this in: 502-361-7899 Email this in: Angela.greenwell@scouting.org
1-6801-173-20

Any Questions? Contact:
Todd Moyes
(812)989-7491
eagle_bear@outlook.com