



PHILMONT EXPEDITION 2016 SCOUT APPLICATION

June 18-July 2, 2016
(Actual dates at Philmont are June 19-July 1)



(Please type or print in black ink)

Name: _____
 First Middle Last

Shirt Size (Adult): _____ Preferred to be called: _____

Date of Birth: _____ Age: _____ Grade in School: _____

Address: _____

City/Zip: _____

Home Phone: _____

Email: _____

Full name of Parent or Guardian: _____

Mother: _____ Father: _____

Street: _____

C/S/Z: _____

Phone: _____

Work #: _____

Email: _____

(If parents' home address differs from applicant's, please fill in above.)

A person to contact in an emergency other than parent or guardian:

Name: _____

Relationship: _____

Address: _____

City/State/Zip: _____

Home Phone: _____ Work Phone: _____

Troop/Post Number: _____ Scouting Rank: _____ OA? _____ NYLT? _____

Leadership Positions held: _____

Long-term camping experience: _____

Back Packing/High Adventure Programs: _____

Travel Experience – States other than KY, OH, IN: _____
Hobbies: _____
Sports I like or excel in: _____



What do you most wish to gain out of your Philmont experience? _____

A \$100.00 registration fee is required with the completed application. This deposit will be returned if the application is not accepted.

Once fees are paid to Philmont, they CAN NOT be refunded.

Completed this form and return to:

**Philmont Expedition 2016
Lincoln Heritage Council, Boy Scouts of America
12001 Sycamore Station Place
Louisville, Kentucky 40299**

I would like to participate in the Lincoln Heritage Council 2016 Philmont Expedition. I understand it will be an arduous, demanding 12-day adventure and pledge that I personally will do everything possible to make it a pleasant and rewarding experience for all who participate. I also understand that this application does not guarantee a spot in the Contingent due to a limited number available.

Date

Signature of Applicant

Date

Signature of Parent/Guardian (if under 21)

List two (2) persons active in Scouting who we can contact regarding your application.

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

(Please print information)