



**Cost:** \$38.38 for Youth (under 21)  
42.42 for Adults (21 and up)

**REGISTRATION DEADLINE: December 18, 2003**

We meet at Mark Bollman's House (19009 Philomene; Allen Park) at 7:30 AM on December 27th to leave for camp. His number is 313-386-1146

**MEMBER INFORMATION:**

<b>NAME</b>	
<b>ADDRESS</b>	
<b>CITY</b>	
<b>ZIP CODE</b>	
<b>EMAIL</b>	
<b>HOME PHONE</b>	
<b>CHAPTER NAME:</b>	
<b>DISTRICT</b>	

In consideration of the benefits to be derived, and in view of the fact that the BSA is an educational organization, membership in which is voluntary, and having full confidence that every precaution will be taken to ensure the safety and well-being of my son during this activity or trip, I here-by agree to his participation and waive all claims against the leaders of this activity or trip, the officers, agents, and representatives of the BSA.

In the event that I cannot be reached in an emergency, I here-by give permission to the physician selected by a designated representative of the Boy Scouts of America to authorize emergency medical or surgical treatment, routine, nonsurgical medical care, hospitalization, secure proper anesthesia, or to order injections for my son.

The person herein described is in good health, has all required immunization current, and I assume the health responsibility for the individual.

Parent or Guardian Signature and date required for youth (under 18)

<b>Migisi Opawgan Lodge #162</b>	<b>Winter Camp XXVIII</b>	<b>**DETACH AND SAVE FOR YOUR RECORDS**</b>	
<b>Name</b>		<b>Date Paid</b>	
<b>Amount Paid:</b>			

**Winter Camp XXVIII**

**December 27-31, 2004**

**Location: D-A Scout Ranch, Metamora, MI**

**Any questions?** Call Steve Donohue 313-383-7224 or check out our website: [www.wintercamp.com](http://www.wintercamp.com)

**EMERGENCY INFORMATION:**

Person to contact if no answer at home

<b>Name</b>	
<b>Relation</b>	
<b>Phone/Pager #</b>	

Special health considerations or directions


Insurance Information

<b>Company</b>	
<b>Member ID#</b>	

Ride information

We need to know who you're riding with and when to try to minimize cars. We also need to know if you have to leave early or come late.

Arriving: _____
Leaving: _____
Ride (someone's name): _____
We have room for _____ more people and their gear.

Make checks payable to: **Steve Donohue**

Send this Registration form with check to:

**Mahican Chapter**  
**c/o Steve Donohue**  
**17612 Herrick St.**  
**Allen Park, MI 48101**

**O-A MEMBER # :** \_\_\_\_\_

**Amount Paid:** \_\_\_\_\_

**Receipt #:** \_\_\_\_\_