

TIWAHE LODGE
San Diego-Imperial Council
2009 FALL ORDEAL – Sept 25-26
MATAGUAY SCOUT RESERVATION
Fall Ordeal Arrival Time: 5:30-8:00 PM Friday
Registration Form
(Permission slip mandatory for under 18)

Name: _____ **Troop/Team/Crew #** _____

Chapter: _____ **Youth** _____ **Adult** _____

Address: _____ **Phone (____)** _____

City: _____ **State:** _____ **Zip:** _____ **E-Mail Address:** _____

Are you staying over Saturday night? Yes / No (Circle one)

Fees for Fall Ordeal:

____ **Arrowmen @ \$10.00/ea** = _____

____ **Arrowmen @ \$15.00/ea (after 9/22/09)** = _____

TOTAL ENCLOSED = _____

(If you have not paid your 2009 dues, please bring with you or pay beforehand)

Make checks payable to: **BSA** Account: 1-2371-000-00

Mail to: Boy Scouts of America, Tiwahe Lodge #45, 1207 Upas Street, San Diego, CA 92103

(Official Use Only) Date Received: _____ **Amount Received:** _____ **Receipt Number:** _____

I/We hereby give our permission for our son/myself to participate in the activities of Tiwahe Lodge. I/We certify that I am/he is healthy and capable of participating in these activities (which include camping, hiking, and other outdoor activities). I/We assume financial responsibility for any emergency medical treatment (including surgery) that may have to be administered and give permission for such treatment.

Signed: _____ **Date:** _____

Print Name: _____ **Relationship:** _____

Telephone: _____

Other Contact: _____ **Phone:** _____

Insurance Carrier: _____ **Policy Number:** _____

Family Doctor: _____ **Telephone:** _____

Please note any special dietary needs, restrictions, limitations, or allergies that may limit your son's/your participation in a Tiwahe Lodge Event:

