



**4<sup>th</sup> Annual 10 Commandments Hike  
November 27, 2009**



**REGISTRATION FORM**

**Must be received by November 21, 2009**

(Print Neatly)

Scout Unit Name/Number or Youth Group Name: \_\_\_\_\_

Leader Contact Name, Phone, e-mail: \_\_\_\_\_

Please include age of Youth Member/Sibling	Duty to God Patch (Optional \$3.00 extra)	Check One
Name _____	<input type="checkbox"/> Boy Scout Patch <input type="checkbox"/> Girl Scout Patch <input type="checkbox"/> Current Segment	<input type="checkbox"/> Youth Member <input type="checkbox"/> Adult Leader <input type="checkbox"/> Parent/Guardian <input type="checkbox"/> Sibling
Name _____	<input type="checkbox"/> Boy Scout Patch <input type="checkbox"/> Girl Scout Patch <input type="checkbox"/> Current Segment	<input type="checkbox"/> Youth Member <input type="checkbox"/> Adult Leader <input type="checkbox"/> Parent/Guardian <input type="checkbox"/> Sibling
Name _____	<input type="checkbox"/> Boy Scout Patch <input type="checkbox"/> Girl Scout Patch <input type="checkbox"/> Current Segment	<input type="checkbox"/> Youth Member <input type="checkbox"/> Adult Leader <input type="checkbox"/> Parent/Guardian <input type="checkbox"/> Sibling
Name _____	<input type="checkbox"/> Boy Scout Patch <input type="checkbox"/> Girl Scout Patch <input type="checkbox"/> Current Segment	<input type="checkbox"/> Youth Member <input type="checkbox"/> Adult Leader <input type="checkbox"/> Parent/Guardian <input type="checkbox"/> Sibling
Name _____	<input type="checkbox"/> Boy Scout Patch <input type="checkbox"/> Girl Scout Patch <input type="checkbox"/> Current Segment	<input type="checkbox"/> Youth Member <input type="checkbox"/> Adult Leader <input type="checkbox"/> Parent/Guardian <input type="checkbox"/> Sibling

**Make additional copies of this form as necessary**

<b>FEE:</b> (includes 10 Commandments Hike patch and lunch)	Family Rate is \$25 plus \$1 insurance fee for each non-Scout
Number of registered Boy Scouts or Girl Scouts and Adult Leaders	@ \$7.00 each = \$ _____
Number of Parents/Guardians, Siblings of registered Scouts	@ \$8.00 each = \$ _____
Number of Church Youth Group members and Adult Leaders	@ \$8.00 each = \$ _____
Number of Boy Scout Duty to God patches requested (optional)	@ \$3.00 each = \$ _____
Number of Girls Scout Duty to God patches requested (optional)	@ \$3.00 each = \$ _____
Total Amount for this sheet	\$ _____
Grand total from _____ Registration sheets for this unit or group	\$ _____
Certificate of Insurance for non-BSA groups included with this registration? YES / NO (circle one)	

**Make Checks payable to: Baden Powell Council, BSA**

**Mail to: Baden-Powell Council Service Center  
Attn: 10 Commandments Hike  
P.O. Box 66  
Binghamton, New York 13903**