



**6th Annual 10 Commandments Hike
November 25, 2011**



REGISTRATION FORM

Must be received by November 18, 2011

(Print Neatly)

The Hike will take place in Cortland, NY this year.

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

Make additional copies of this form as necessary

FEE: (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**