

**CENTRAL NEW JERSEY COUNCIL
SUMMER CAMPING 2008
PROVISIONAL CAMPER
BOY SCOUT APPLICATION**

WEEK 1 – JUNE 29-JULY 5

WEEK 2 - JULY 6-12

WEEK 3 - JULY 13-19

WEEK 4 - JULY 20-26

WEEK 5 - JULY 27-AUG. 2

IMPORTANT: Every Scout who wants to attend KMSR as a provisional camper must fill out the information on this form and provide a parent or guardian's signature.

- I want to camp as an individual with Super Troop 352. Send payment directly to the Council office. Enclosed is my registration fee of \$275 (\$250 before May 1, 2008).**

Payments for week(s) of:

___ June 29-July 5 ___ July 6-12 ___ July 13-19 ___ July 20-26 ___ July 27-Aug. 2

Please Print Clearly

Scout's Name _____ **Troop #** _____ **District** _____

Street _____

City _____ **State** _____ **Zip** _____

Home Phone (____) _____ **Parent's Daytime** (____) _____

Parent or Guardian's Name (Print) _____

E-mail (Print Clearly) _____

Parent's Signature _____ **Date** _____

By signing this application I acknowledge that I agree with the procedures and policies of the Central New Jersey Council, BSA, including but not limited to the health services and refund policy. I also, hereby consent to the use of my son's voice and/or photographic image in any news coverage, movie making, or similar projects as approved by the Central New Jersey Council.

CNJC Refund Policy: The first \$50.00 of any Provisional Camper fee paid is non-refundable. Full payments are transferable to other Scouts (with a note from both parents) until June 15th. The balance of the fee is refundable for the following reasons: illness requiring medical attention, summer school, or family emergency. Refund requests must be in writing, include proof, and be received at CNJC no later than August 31st. The full refund policy is available at www.cnjcbsa.org.

**Make check payable to:
MAILING ADDRESS:**

**CENTRAL NEW JERSEY COUNCIL, BSA
4315 US ROUTE 1 SOUTH
MONMOUTH JCT. NJ 08852**