



8th Markham, Scouts Canada (2017 – 2018)

GROUP SUMMER COUNCIL CAMP 2018

Date of Camp: Friday, June 1 - Sunday, June 3, 2018

Theme: Space Exploration

Camp Location: Camp Bonaire, 1504 Woodrow Road, Coldwater, ON, L0K 1E0

Gathering Time: 7:00 – 8:00 pm, Friday, June 1, 2018 (All members are required to arrive and gather at the site.)

Departure Time: 12:00 noon, Sunday, June 3, 2018

Camping Cost: \$50 / person

This is the final group camp for this chartered year. We will not have our own summer camp, but instead, we will join the council-wide camp for the adventures. You will meet lots of new friends from other groups and find lots of new skills and adventures. The council is expecting estimated 3000 participants, so it will be a huge camping for the group.

Members from all sections are welcomed to join this camping event. All people will camp outside and sleep in the tents, so be prepared and dress properly. Packing slip will be provided if you sign up for the camp.

Please EAT before you enter the camp. There will be NO dinner served on Friday night; only light snack. Enjoy the camp!

NOTE: On site contact persons for emergency:

Peck Yap	-----	(647) 202-4617	(Group)
Danny Cheng	-----	(416) 220-2200	(Beaver)
Elaine Mak	-----	(416) 456-8098	(Cub)
Arthur Wu	-----	(416) 723-0909	(Troop)
Reno Sit	-----	(647) 887-3665	(Venturer)

Please return the bottom half of the form with payment by next meeting, Thursday, April 5, 2018, since we will need to meet the deadline to mail in the pre-registration.

✂ *****✂*****✂*****✂***** Return Bottom section ✂ *****✂*****✂*****✂*****

Summer Council Camp 2018

I do/do not (*cross out one*) permit _____ to go to the Summer Council Camp on June 1-3, 2018 at Camp Bonaire, Coldwater. I understand that there is an inherent risk in this or any activity and in signing this form gives permission for the Scouter(s) in charge to obtain medical assistance as stipulated on his/her Health Form if required.

Number of Persons: ☐ Adult ☐ Youth Section: _____

Are you interested to take bus: ☐ No ☐ Yes No. of passage: _____

Signature: _____ Contact Number: _____ Date: _____

Please list any allergies, dietary restrictions or medications being taken that the Scouter(s) should be aware of:

Date collected: _____ Cash: _____ Cheque #: _____ Received by: _____

Note: _____