CAMP REGISTRATION FORM

Use this form to register for any camp.

1. Register online at OR



gslc-bsa.org

Unit # (Pack, Troop, Team, Crew)	District #
Sponsoring Institution	
Leader Name	
Address	
City	
you coming to camp with another	group?
If yes, what is/are the unit number(s) of the units	
Please remember each unit needs a separate regis	stration for camp, including units snaming a camp
I us about the camp you want to at	tend:
Camp Name	
Camp Name Dates: 1st choice	O d desire
Dates. 1st choice	2nd choice
Camp Site (if applicable) out the membership information for	Food Option (if applicable)orm on the back of this page.
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7. Fax this form to the Camp Desk at (801) 582-7401 with credit card info, OR mail this page along with a check or your credit card info, OR come in person to one of the Scout Stores.

ZIP ZIP District # STATE STATE CITY CITY Unit # ADDRESS ADDRESS Please fill in information about the adults who will be coming to camp. MEMBERSHIP FORM Please turn in this form to the Scout Office when you sign up for camp. D.O.B. D.O.B. Please fill in information about the youth in your unit. PHONE PHONE NAME NAME