



Pitt District Cub Twilight Camp



June 19-23, 6~9pm
River Park North, Greenville

Twilight Camp is held annually and is a wonderful way for Cub Scout aged youth to get out doors during the summer, experience the fun of Scouting, all while building great memories. It is for all boys in 1-5th grade (2017-18 school year). (1st grade Tiger Cubs *must* be accompanied by a parent/guardian.) The Cubs will have an opportunity to reinforce the values of Scouting, practice their BB and archery skills, pass off cub rank requirements, explore the insect world, and just plain have fun.

\$65 if signed up by June 1st; \$80 after June 1st

Register online (Under District Day Camps): <https://ecc.tentaroo.com/>

Or send Registration by mail to:

ECC - Pitt Twilight Camp
PO Box 1698
Kinston, NC 28503
Checks payable to: *ECC BSA*

Please provide your email address & phone number on all registration forms so our Camp Director, Victoria Brown, can be in contact with you for any updates.

- Camp Director Questions? ncfom@aol.com or call (252) 714-5974.

Camp Directors and team have put in a lot of hours of training and preparing so that your boys will have the best experience possible. Help them out by volunteering during the camp; contact Victoria if you are available. Those that volunteer will be invited to a Staff Orientation.

Orientation: River Park North, June 17. Parents/guardians come anytime 1-2:30pm to drop off completed medical form (http://www.scouting.org/filestore/HealthSafety/pdf/680-001_AB.pdf), receive camp shirts, and briefly review the camp rules as well as any other needed info for parents/guardians. Please attend this important orientation so the first day can run as smooth as possible.

What to bring: (Remember to label everything.)

- *Camp T-shirt everyday (provided at Camp Orientation)
- *Backpack or Daypack as needed
- ***Water bottle** or non-breakable mug with clip (Leave No Trace)
- *Closed toed shoes, that can get dirty, must be worn at all times.



Refund Policy: Fees for this event are not refundable due to the nature of the event. Exception: In the case of a sickness, a doctor's note must be provided to the Council Service Center by the following Monday after the event. Fax number: 252-522-9707. Contact the Council office at 1-252-522-1521 to discuss refund due to cancellation.

National BSA Camp School
Accredited Leaders and Camp

Pitt County United Way Designate:
East Carolina Council, BSA



2017 Cub Scout (Youth) Registration Form



Registering for: Pitt Twilight Camp

Code: 118

In order to register a Cub Scout for Twilight Camp, this form and the Medical/information sheet Part A and B must be filled out, in ink, for each Scout. The registration fee must accompany this form. Scouts registered after the sign-up date will not be guaranteed a T-shirt upon arrival at camp. **An adult partner must accompany each Tiger cub.**

Pack Number _____

Cub Scout's Name _____ Birth Date (MM/DD/YYYY) _____

Cub Scout's address _____

Parent Email _____

Phone Number _____

Circle the rank your scout will be working on during the Summer and into the Fall 2017.
(Grades below should reflect 2017-18 school year).

1st (Tiger) 2nd (Wolf) 3rd (Bear) 4th (Webelos I) 5th (Webelos II)

Each scout will receive **one** free t-shirt for camp. **The t-shirt must be worn every day at camp.**

Extra t-shirts may be purchased at Camp if available. Circle the appropriate t-shirt size **for your Scout:**

(Circle One) (Youth) (Adult)
6-8 (sm) 10-12 (med) 14-16 (lg) S M L XL 2X 3X

Emergency Contact: During the activity, parent(s) may be reached at

Parent/Guardian's name _____

Contact number(s) _____

If your son is on medication, please bring it to the Registration/First Aid station in the original prescription container on the first day of orientation. All medication must be logged in and maintained by the first aid personnel.

Fee Schedule

Cub Scouts ___X \$65=\$_____

Total Enclosed \$_____

Late Registration (after June 1st) Cub Scouts ___X \$80=\$_____

(Circle one): Check MC Visa Exp. Date: ___ / ___

Card # _____

Name on Card _____

Please make checks payable to: **ECC BSA** and on the memo line, write "Pitt Twilight Camp #118".

Adult Registration Form
2017 Pitt Twilight Camp #118
An adult partner must accompany each Lion & Tiger cub.



Pack Number _____

Adult's Name _____ Birth date _____

Are you a REGISTERED member of the Boy Scouts of America? Y / N

E-mail address: _____

Postal Address: _____

Phone Number: _____

Will you be able to volunteer all evenings M-F the week of Twilight Camp? _____

If not, which days are you able to volunteer? _____

Circle the appropriate position(s) you are willing to help with:

DW -Den Walker – (Helps move groups from station to station)

PA -Program Assistant – (Helps with activities at stations)

DL -Den Leader – (Coordinates your group's activities, prefer those able to volunteer M-F)

MED -First Aid Personnel

Any -Any position

Circle your appropriate t-shirt size:

(Circle one adult size) S M L XL 2X 3X

Emergency Contact:

Contact name: _____

Contact number(s): _____