Allegheny Highlands Council **Boy Scouts of America**

2009 ADULT LEADER CAMP APPLICATION

☐ CAMP MERZ ☐ ELK LICK SCOUT RESERVE

Name_____Troop_____Council_____
Last First

Address_____
Street City State / Zip

Date of Birth_____

Phone: Day _____Cell:_____ Evening: _____

Signature_____Date_____

Please check which camp session you will be attending below.

☐ BS 1 - July 5 – 10, Camp Merz
☐ BS 2 - July 12 – 17, Camp Merz
☐ BS 3 - July 19 - 24, Camp Merz
☐ BS 4 - July 26 - 31, Camp Merz
☐ BS 5 - July 26 – 31, Elk Lick Scout Res.
☐ BS 6 – Aug 2 - 7, Elk Lick Scout Res.

Payment Method:

☐ Check or Money Order ☐ Visa / MasterCard ☐ American Express

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Account # **Exp. Date**

Authorized Signature_____ **Date**_____

☐ I would like to offer my help during my stay at camp in the following areas of interest: _____

_____

_____

Leader Fee Structure

# of Boys	# of Free Leader(s)
1 – 8	1
9 – 16	2
17 – 24	3
25 – 32	4
33 – 40	5

Additional Leaders $60

NOTE: *By attending camp you are authorizing the Allegheny Highlands Council the right to use your image in any photographs or videos taken at camp for promotional purposes.*