

FEES:

\$65.00 per Cub Squad Member (Cub Scout)

\$35.00 per Jimmy Neutron (see next page for details)

If you volunteer for the whole week (Monday - Friday), you will receive a free Camp Shirt (\$10 value) and \$10 off the camp fee for your 1st Cub Squad Member and \$5 off your 1st Jimmy Neutron. Make checks payable to Atlanta Area Council, BSA.

DEADLINES:

Early Registration Applications

(including health forms and fees) Applications must be postmarked by May 28, 2010 to be eligible for early registration rates.

Late Registration Applications

\$15 late fee after May 28, 2010. No applications will be accepted after June 12th. No refunds will be given after June 12, 2010. When Twilight Camp reaches capacity, a waiting list will be maintained.

IMPORTANT NOTE:

Preference will be given to units with adequate volunteer participation, and all applications should come through their Pack coordinator. All scouts and leaders must be registered members of the Boy Scouts of America. All leaders must have current Youth Protection Training.

REGISTRATION:

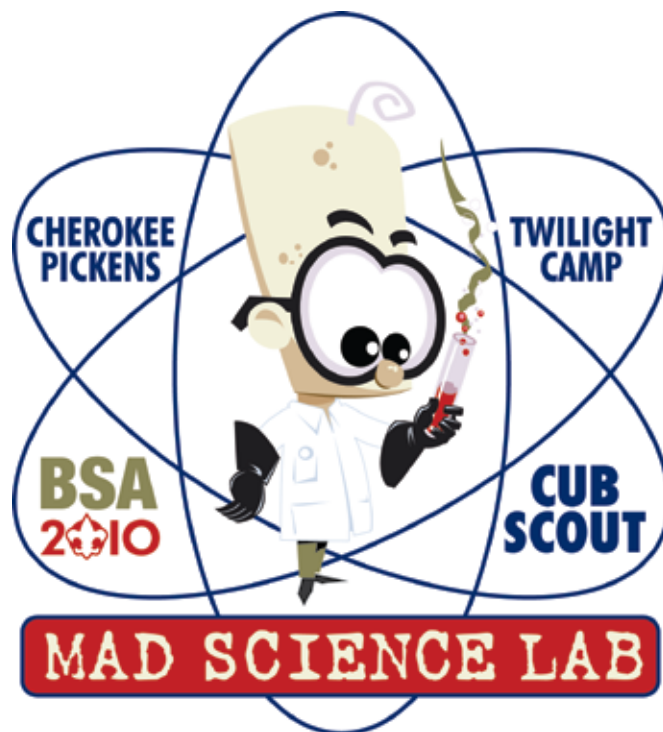
Please be sure to coordinate with your pack to make sure you have enough adult leadership representation from your pack for the number of boys attending camp.

Send check, registration, & health forms to:

Atlanta Area Council
Boy Scouts of America
Attn: Program Center
1800 Circle 75 Parkway, SE
Atlanta, GA 30339

Include this event code on your check: **129**

Orange UMC
220 Orange Church Circle
Canton, GA 30115



July 12th - July 16th
6:00 pm - 9:00 pm

CAMP DIRECTORS

Deborah Gibson

Camp Director
deborah@catalystad.com
678.386.4447

Donna Carr

Program Director
gttools@bellsouth.net
770.633.6587

Contact us for further information

CUB SQUAD MEMBER (**Cub Scout**) ELIGIBILITY:

Boys who are currently in grades 1 thru 4 may attend camp. In general, if your son will be a Wolf, Bear, Webelos I, or Webelos II scout in September 2010, he will be eligible for Twilight Camp. We will have Tiger Dens again this year. If the boy has completed kindergarten or is 7 years old and is registered as a Tiger Cub he may participate WITH his adult partner. Adult partners will be required to purchase a camp T-shirt (~~\$10~~) and do not count as staff contribution from packs.

JIMMY NEUTRON (**Sibling**) PROGRAM:

The Jimmy Neutron Program is provided as a convenience to volunteer camp leaders and is only open to children of full time leaders.

Protons are male and female siblings 3-6 years old. **Neutrons are** female siblings ages 7-13 and male siblings ages 11-13. **Neutrons** will have the option to help/hang out in the **Brain Blast Den** or may act as Den Aides with their sibling/parent's den.

See the Jimmy Neutron application for more information.

YOUTH VOLUNTEERS:

Youth Volunteers are needed in all program areas of the camp. Youth volunteers should have the following characteristics:

- Be 14 years old or older (Boy Scouts under 14 who are serving as Den Chiefs may come to Twilight Camp with that den and continue to provide leadership as a den chief.)
- Works well with younger children
- Serves as a good role model
- Is responsible, reliable, and possesses skills in the program area requested

Youth Volunteers will work the entire week of camp and will be supervised by an Adult leader.

PROGRAM:

This year's theme is: *Cub Scout Mad Science Lab*. We will be shooting off water rockets, making snot and dry ice bombs. We'll have a space derby and in lieu of a campfire on the last day, we will blow up a big volcano! The daily program includes shooting sports (archery and BB's), crafts, nature, games, den meetings, and opening/closing ceremonies. Friday will be our **Big Blast** and parents are invited to attend. We will have lots of fun and some of it may be wet. So, like a good scout, be prepared. Patches will be awarded at the campfire. Each boy will receive a list of the achievements completed during camp to be applied toward advancement in September.

DRESS:

The camp fee includes one Twilight Camp T-shirt. Please indicate the correct size on the application and if unsure, order the next larger size. The official camp uniform consists of the official camp T-shirt, short pants, and comfortable, closed in shoes with socks. No "Heelies" or Crocs type shoes. Class A scout uniforms should not be worn! Hats sunscreen and bug spray are strongly recommended for outdoor activities. Every member of camp must wear the uniform daily. No exception. Extra shirts can be ordered at registration.

MEALS:

No meals will be served during the course of camp. Each camper is responsible for bringing a snack and beverage daily. All campers should bring a water bottle daily. Water will be provided at each station.

TRANSPORTATION:

Each camper is responsible for his own transportation to and from camp. There will be a car pool line for drop off. A responsible adult must walk scouts into camp on Monday night and pick up in den areas each day. Carpooling is encouraged. Carpool/drop off and pick up instructions will be given at a later date.

LEADERS:

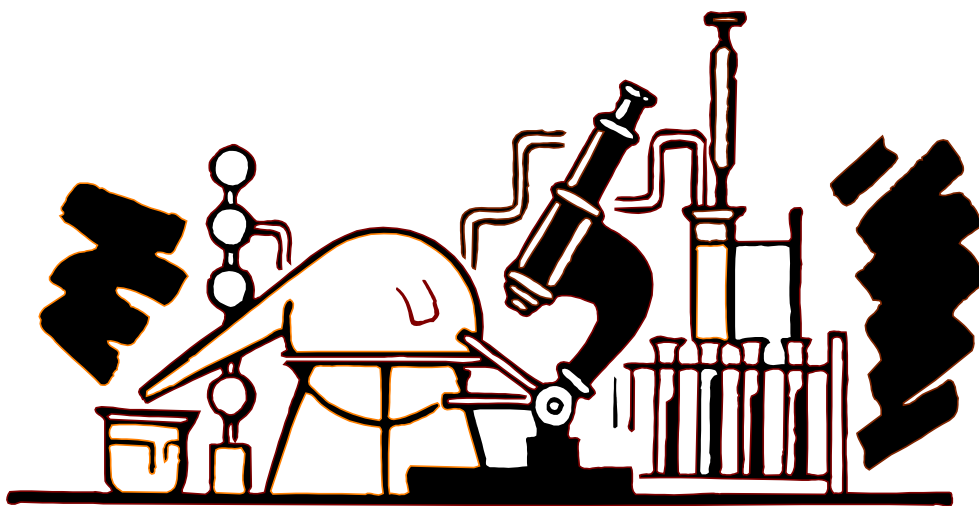
Twilight Camp is planned, organized, and run by volunteer leaders. The success of the program and the quality of your son's camp experience depend on an adequate pool of volunteer leaders. Therefore, each pack must provide at least 1 full-time leader for every 3 Cub scouts. In addition, Packs which send more than 5 siblings must send one more full time leader. Each Pack is required to provide 1 volunteer for the "clean-up crew" immediately following the close of camp on Friday. Adult partners of Tiger Cubs do not count toward leader contributions. Since safety and quality are primary concerns, the size and scope of the program and the number of scouts admitted will be adjusted to fit the available volunteer resources. Leaders volunteering to work the full week of camp will be provided a camp T-shirt. For further information on volunteering, please call the Twilight Camp Director. Remember, if you work the full week of camp, your scout is guaranteed a slot.

ORIENTATION:

Orientation is MANDATORY for all volunteers. Training will be held on Saturday, June 26, 2010 9:00 am at Orange United Methodist Church.*

MEDICATION:

If your child is on medication during the school year, the medication must be continued during Twilight Camp. See the camp health form for additional information.



**This date and location has not been 100% confirmed as of press time on this application. Please stay tuned to Roundtable for confirmation or alternate details.*

Cub Scout Mad Science Lab

CUB SCOUT TWILIGHT CAMP 2010

ADULT LEADER APPLICATION

_____ Male _____ Female _____ Pack _____
Last Name, First Name

_____ City _____ State _____ Zip _____
Street Address

Phone: (H) _____ (W) _____ (C) _____ E-mail: _____

Name and rank of children at camp

_____ Pack Position _____
Previous Camp Experience

_____ Phone:(H) _____ (W) _____ (C) _____

Emergency Contact/Relationship

Youth Protection Training: Date Taken _____ or Not Completed _____

CPR certified? Yes _____ No _____ First Aid Certified ? Yes _____ No _____

T-Shirt: One shirt will be provided free for full-time (5 day) volunteers. Please check appropriate size.

Adult sizes: Small _____ Medium _____ Large _____ XL _____ XXL _____ XXXL _____

Additional shirts may be ordered for \$10.00 each (\$11 for XXL or above)

additional shirts _____ Size _____

(Part time – 1-4 day volunteers should order their own shirt OR one will be provided for the day’s use only)

AVAILABLE TO HELP: Full time (all 5 days) _____ **OR** M Tu W Th F

Please indicate where you would like to volunteer. Please remember this is only a request and we will do our best to honor it.

Den Leader: Wolf _____ Bear _____ Webelos I _____ Webelos II _____

Jimmy Neutron Leader: _____ Jimmy Neutron Assistant Leader: _____

Activities: Games _____ Crafts _____ Nature _____ Speaker _____

Wherever needed _____ Shooting Sports (Requires certification) _____

All adult leaders must be registered with the Boy Scouts of America. If you are not currently registered with your Pack, you MUST complete a BSA Adult Leader Registration form. This can be obtained from your Pack Committee Chair OR at the 2010 Twilight Camp Leader Training session. A Cub Scout Twilight Camp Health/Medical Form must accompany this application.

Cub Scout Mad Science Lab

CUB SCOUT TWILIGHT CAMP 2010

HEALTH AND MEDICAL HISTORY FORM

CUB SCOUT _____ ADULT VOLUNTEER _____ YOUTH VOLUNTEER _____ SIBLING _____

_____ Pack _____
Last Name, First Name

Rank _____ Age _____ DOB _____

_____ Phone: (H) _____ (W) _____ (C) _____
Parent/Guardian's Name (Last, First)

Street Address _____ City _____ State _____ Zip _____
_____ Phone: (H) _____ (W) _____ (C) _____

Emergency Contact/Relationship _____

Physician's Name and Phone Number _____

HEALTH INFORMATION:

Has or is subject to (check and give details):

- _____ Asthma _____
- _____ Diabetes _____
- _____ Hyperactivity _____
- _____ Fainting Spells _____
- _____ Convulsions _____
- _____ Heart Trouble _____
- _____ Allergy _____
- _____ Other _____

Does this person have any mental or physical special needs? Please explain:

Does this person have any conditions now requiring regular medication? Please explain:

Name of medication (s): _____

Describe any other health or other concerns: _____

NOTICE: If your child is on medication during the school year, the medication must be continued during Cub Scout TwilightCamp. Medications to be given during the day need to be turned into the Camp Nurse on Monday evening. They need to be in the original prescription bottle and in a plastic bag with the child's name on the outside.

PARENT/ADULT VOLUNTEER AUTHORIZATION: this health history is correct to the best of my knowledge and the person herein described has permission (or is able) to engage in all prescribed activities except as noted above. In the event that I, or the emergency contact, cannot be reached in an emergency, I request that measures be instituted without delay as judgment of medical personnel dictates.

Signature of Parent/Guardian, or Adult Volunteer

Date