

**2009 Resident Camp
Program Assistant and Wrangler In Training Registration**

Name of Camper _____ Current Member of Girl Scouts? Yes _____ No _____

If not a current member of Girl Scouts, please enclose \$10 for membership when returning forms.

GSUSA ID # _____ Troop # _____

Address _____ Home Phone _____ Cell _____

E-mail _____ Council Name (out of council registration) _____

Emergency contact person _____ Phone # _____

Grade in 2008 – 2009 _____ Age at Camp _____ Camper's Date of Birth _____

Number of times previously attended resident camp? _____

The camp fee includes a t-shirt received at camp.

T-Shirt Size(s) (circle one) Youth M L XL Adult M L XL

**Camp Session (use the session name and dates when making your choices)
Registrations are accepted on a qualified first-come, first-served basis.**

1st Choice _____ 2nd Choice _____ 3rd Choice _____

Does the camper have special needs? _____ If so, please explain: _____

Mother's/Guardian's Name _____ Home Phone _____

Work Phone _____ Cell Phone _____

Father's/Guardian's Name _____ Home Phone _____

Work Phone _____ Cell Phone _____

Emergency Local contact in the event parent/guardian can not be reached: Name _____

Home Phone _____ Work Phone _____ Cell Phone _____

I have read the camp brochure and give permission for my daughter to make this application and volunteer at camp.

PARENT SIGNATURE _____ DATE _____

We encourage you voluntarily to provide the following information on racial background and ethnicity. This information will be used by Girl Scouts of the USA to help improve outreach efforts and advance the Girl Scout Movement.

The registrant's racial background is: (please check as many as apply)

- American Indian or Alaskan Native Asian
 Black or African American Hawaiian or Pacific Islander White Other (specify _____)

The registrant's ethnic background is: (please check one)

- Hispanic or Latina _____ Not Hispanic or Latina

**Please download the following forms from our website, www.gswcf.org:
Registration, Camper Information, Health**

Send all forms to Girl Scouts of West Central Florida, PO Box 18066, Tampa, FL 33679-8066.